

STATE OF CALIFORNIA

GOODWIN J. KNIGHT  
Governor



... FOR THE WELFARE OF ALL ...

ANNUAL  
REPORT  
1957-1958

DEPARTMENT OF  
SOCIAL WELFARE

GEORGE K. WYMAN, *Director*



*Annual Report of the*

# STATE DEPARTMENT OF SOCIAL WELFARE

*July 1, 1957, to June 30, 1958*

GOVERNOR  
OF  
CALIFORNIA

GOODWIN J. KNIGHT

DIRECTOR  
SOCIAL WELFARE  
DEPARTMENT

GEORGE K. WYMAN

SOCIAL  
WELFARE  
BOARD

JOHN T. MARTIN, *Chairman*  
MRS. JACKSON W. CHANCE, *Vice Chairman*  
MRS. GEORGE H. BOWMAN  
MRS. LAWRENCE W. FRANKLEY  
NORMAN J. HARTZER  
LOUIS N. SLATER  
DR. JACOBUS TENBROEK

SACRAMENTO, CALIFORNIA



## TABLE OF CONTENTS

	Page
Public Social Welfare In California.....	4
Public Assistance.....	5
Old Age Security.....	5
Aid to the Blind.....	7
Aid to Needy Children.....	11
Aid to the Disabled.....	14
General Relief.....	15
Medical Care.....	16
Child Welfare Services.....	18
Adoptions.....	19
Licensing.....	24
Services.....	26
Awards.....	30
Director, State Department of Social Welfare.....	32
State Social Welfare Board.....	32
Department Staff.....	34
<i>(Program and Financial Data Tables are available in a separate booklet and can be obtained on request to the State Department of Social Welfare.)</i>	

*Cover picture by Gene Sapnaro  
of Sacramento, California*

AREA OFFICES

LOS ANGELES OFFICE  
MICHIGAN 8411  
CAIRNS BUILDING  
108 WEST SIXTH STREET  
14

SACRAMENTO OFFICE  
GILBERT 2-4711  
1530 CAPITOL AVENUE  
P. O. BOX 818  
4

SAN FRANCISCO OFFICE  
EXBROOK 2-8751  
PACIFIC BUILDING  
821 MARKET STREET  
3

Goodwin J. Knight  
Governor

STATE HEADQUARTERS

SACRAMENTO  
GILBERT 2-4711  
722 CAPITOL AVENUE  
14

STATE OF CALIFORNIA

Department of Social Welfare

GEORGE K. WYMAN  
DIRECTOR

ADDRESS REPLY TO:

722 Capitol Avenue  
Sacramento 14

Honorable Goodwin J. Knight  
Governor of California  
State Capitol  
Sacramento, California

Dear Governor Knight:

It is again a pleasure to comply with Section 123 of the Welfare and Institutions Code in transmitting herewith the report of the State Department of Social Welfare for the year ending June 30, 1958.

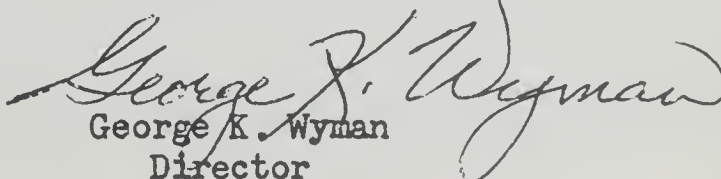
In the report for the year ending June 30, 1957, we chose the theme "Welfare is People," because without assistance people would suffer and without the active support of all the people there could be no enlightened, progressive assistance programs.

The people of California by their active support of welfare for those in need are themselves benefited, directly and indirectly. Therefore, the programs that most directly benefit almost 500,000 people are "For the Welfare of All."

This report will by means of questions from an imaginary forum of representative citizens explain what this Department under your leadership has accomplished during the fiscal year ending June 30, 1958. And also, what it means to the economy and progress of every resident in this State to have the needs of those who must seek assistance taken care of promptly in a humane and dignified fashion.

Your leadership has shown that it is your desire to serve all the people. This report is presented as witness to the accomplishments of this Department in carrying out your desire and the intent of the Legislature to serve all the people in California.

Respectfully submitted,

  
George K. Wyman  
Director



# PUBLIC SOCIAL WELFARE IN CALIFORNIA

"Public Social Welfare in California promotes the general welfare of the entire State and directly and indirectly every citizen benefits."

That was the first sentence in the 1956-57 Annual Report of this department and it was the most important in the entire report. The importance of the sentence was supported by: "... It is an essential element in this accelerated age. In fact, it is so essential that over a million dollars a day—every day of the year—is invested in the welfare of California citizens."

There is no doubt that everyone in California is convinced that something must be done for those in need of pecuniary assistance and social welfare guidance. Many have different ideas about methods and amounts of money—but there is agreement on the need.

However, it has been noted, not only during the past year, but for many years that a great majority of the citizens in this State have failed to see any connection between themselves and what the State is doing for the welfare of the needy. That is, unless there is a direct or indirect family or friend benefit.

There is a drastic and dramatic way to reveal the vital link between public assistance and Mr. and Mrs. Solvent Californian. **Destroy public assistance overnight and the value of and need for organized social welfare in today's intricate, swift way of living will be forcefully revealed.**

A much saner and less costly way to reveal that vital link is this report in which the information will be made available by questions from a **forum of representative—but imaginative—group of California citizens.** In effect, this report will be answering both to the Governor as an annual report and for the Governor to the people.

This **forum of representative citizens** could be any portion of those engaged in the thousands of occupations, commercial and noncommercial. Whether the representative is an accountant, a musician, a contractor, scientist or an entertainer he or she is a beneficiary of California's welfare programs in one way or another.

Even small businessmen, big businessmen, advertising agents, public relations workers, printers, skilled mechanics, laborers, wholesalers, retailers, capitalists, realtors, airplane pilots, railroad engineers, bus drivers, taxi drivers, ambulance drivers, county fair managers, architects, attorneys, florists, salesmen, painters, reporters, announcers, electronics specialists and thousands of others, including the sick, the well, the lame, the energetic, the lazy, and even those who have adequate means to enjoy retirement are a part of the almost endless chain of those who benefit from good social work.

To put it another way: **A skilled mechanic earns a dollar, he buys a loaf of bread, the baker pays his rent, the landlord buys a hat, the hatter buys a purse**

**for his wife, the merchant pays his secretary, the secretary buys an iron, a skilled mechanic earns his dollar by making tools for the manufacture of irons; and around it goes again.**

And even this way: A man is too crippled to work, his money reserve is gone and his wife and children must have help—the Aid to Needy Children Program steps in—first with dollars and then with services. The wife buys a loaf of bread, the baker pays his rent, the landlord . . . ; and around it goes again.

**Services also benefit everyone, for instance:** A family with an elderly person is helped by the Old Age Security Program to show the elderly person how he can assist in self-care and relieve a member of the family from the confining tasks that prevent her from working outside the home. She earns a dollar, she buys a loaf of bread, the baker pays rent, the landlord . . . ; and around it goes again.

Contrast all that with the absence of welfare dollars and social services in just one instance: A man is too crippled to work and his wife and children must have help—Aid to Needy Children Program and General Relief funds are not there to help. But someone—whether honestly, or dishonestly or by depriving themselves must provide the dollars. And amateur social services must take over. Crime goes up, health goes down, and finally it is reflected in our way of life.

## The Report

This report can open anywhere and everywhere in California before the representative group of citizens.

**The first question is asked by:**

### A RETIRED MAN WITH AMPLE MEANS

*Mr. Director, before you make your report to the Governor of the State of California you might preface it by telling us why there is a State Department of Social Welfare. You need not go into the history of welfare or the legal reasons.*

That is easy to answer, at least, it is easy for people who work day in and day out in social welfare. The answer is: Modern society, modern business practices, modern economics and modern ways of living do not provide automatic means of earning a living or methods to solve the many problems that beset people in this constantly changing modern age. Like good decent people we protect and help each other and social welfare has become the modern means to assist. The people have mandated their representatives in the government. The State Department of Social Welfare and the county welfare departments, all staffed with professional social workers and professional administration workers is the result.



## PUBLIC ASSISTANCE

## OLD AGE SECURITY

## QUESTION BY A BIG BUSINESS MAN

*Mr. Director, it's obvious that the State Department of Social Welfare has many programs and activities. Could you start off by telling us something about the largest program. After that we can work down to the smaller programs and activities.*

The largest program in terms of money expended and people receiving assistance is the Old Age Security (OAS) program. This aid to the needy aged is somewhat unique among the public assistance programs in California in that it is a diminishing activity. There has been a slow but continuous decrease in the number of recipients since the 1951-52 Fiscal Year. At the same time the State's population has continued to increase rapidly.

This decrease continued during the past fiscal year and is somewhat as originally planned, that is, a transition program until the Old Age and Survivors Insurance (OASI) benefit payments covers all the elderly. Except, the insurance program has not displaced assistance as rapidly as planned, but the downward trend in the number of people receiving assistance does mean that more and more of California's aged receive their retirement income in the form of Social Security insurance benefits.

**More than 100,000 of recipients also receive these insurance benefits but not in an amount which will meet their need at an assistance standard. Some assistance is needed by them to make up the deficit.**

Despite the slow actual decrease and more rapid relative decrease in numbers as compared with the growing population, the 265,656 recipients who made up the caseload in June, 1958, continued to be an extremely important and significant part of the statewide community. Their needs and their place in the life and affairs of the State continue to call for as thoughtful consideration as if the numerical trend were not downward.

## QUESTION BY A REALTOR

*Just a minute, let me interrupt! Who are these people you are talking about? Tell us something about them. Perhaps a typical example.*

The typical recipient of California's OAS is female, widowed, 76 years of age, owns no real property and has less than \$400 in insurance or cash.

Contrary to the proportionate increase in the national population of persons over 65 years of age, the proportion of the elderly in California is steadily declining. In 1950 the over-65 group comprised 8.6 percent of California's population but by 1958 that figure had slipped to 8.2 percent. The number receiving OAS comprises 22.4 percent of the people in this State over 65 years of age. The majority are old timers in California with an average length of residence of 33 years.

In the group receiving OAS the women outnumber the men 10 to 1. This mirrors the national pattern of females exceeding the males in the older age group and with the majority of females as the homemaker not having the opportunity to obtain OASI coverage as a resource for support.

Loneliness, which too frequently is the companion of old age, is a problem with the recipients as is seen reflected in the small percent who have a surviving spouse. The majority of those who receive aid have far less than the minimum resources permitted by law. Only about one-third own real property. This is their home, which in 84 percent of the cases have an assessed valuation of \$2,000 or less. Only about 5 percent of the recipients have cash resources near the maximum allowance of \$1,200; most recipients have considerably less.

In an advanced age group, health is a major problem. About 15 percent of the recipients are either bedridden or require care because of physical or mental conditions. The remaining 85 percent are able to continue living in the community, but a number probably have nursing and housekeeping help. Many are the victims of chronic illnesses and require medical supervision.

## QUESTION BY SAME REALTOR

*That's enough Mr. Director. Now will you tell us exactly what this Old Age Security is and what is a needy person according to your laws and regulations?*

Old Age Security (OAS), which is more commonly known as the "Old Age Pension," is not, in fact, a pension. It is a grant of assistance which is based upon individual need.

Federal regulations define a needy individual as "one who does not have income and resources sufficient to assure economic security, the standard of which must be defined by each state." Federal regulations then require that the state assistance program have a standard which is used to identify needy individuals and the money amounts necessary to secure the state's defined standard.

Aged persons, perhaps even more than younger ones, have wide variations not only in their needs but also in the income and resources available to meet these needs. Thus, in California the state standard of assistance includes:

**Basic needs;** i.e., normal living expenses common to all persons, such as food, housing, utilities, clothing, transportation, incidentals, etc., and

**Special needs;** i.e., needs related to individual circumstances and not common to all persons, such as medical care, boarding or nursing home care, housekeeping services, etc.

Minimum need of every aged person was set by statute at \$89 a month, and this is considered to be the amount required to meet basic needs. However, when the aged person has special needs, his need is the sum of \$89 for basic needs, plus the cost of the items of special need within established ceilings.



The purpose of the OAS payment is to assist each aged person to secure and maintain for himself a living standard which is consistent with the state standard of assistance. The OAS payment supplements the aged person's own income when such income is insufficient to meet his need.

But what happens when the aged person has no income or has only very limited income? Can he secure for himself the same living standard as the person who has sufficient income of his own to meet all of his special needs?

Unfortunately, the answer to that question cannot always be in the affirmative. Although the law guarantees that the OAS payment together with the individual's income will never be less than \$89 (the amount necessary to meet basic needs), it does not guarantee that the aid payment will always be in an amount which together with the individual's income will cover his total need, including all special needs.

Prior to October, 1957, the maximum OAS grant payable to any individual regardless of need was \$89. Since 32 percent of the OAS recipients had no income of their own, this meant that the standard of living for these recipients was generally limited to basic needs only. This did not mean that these people had no special needs; it merely meant that the special needs could not be met.

The Legislature recognized the particular need of this group and amended the law effective October 1, 1957, making it possible to grant up to \$16 a month more OAS on top of the \$89, or a possible maximum of \$105. Although this still does not guarantee that all the needs of every recipient can be met from his income and grant, it does assure that every aged person who is otherwise eligible will receive an aid payment which, together with his income, will provide basic need of \$89 a month and a minimum of \$16 for special needs when such needs exist.

#### QUESTION BY SAME REALTOR

*Stop right there. Can you capsulize that part about the additional \$16 a month aid grant?*

For many years the old age assistance or Old Age Security as it is known in California had roughly two

groups of recipients; the "haves" and the "have-nots." The "haves" were the recipients who had a small income or resource for their support but less than \$89 a month. For example, the amount of income was \$40 a month from OASI; this recipient, if otherwise eligible, could have received a \$49 a month aid grant, making a total of \$89 a month. He was a "have" because he could use the OASI income for certain special needs, say, \$5 a month for eyeglasses. He would then receive the \$49 a month aid grant plus \$5 a month, giving him \$89 a month for basic living.

The "have-not," in a word, didn't. Now, as noted above, the "have-not" recipient can have approved special needs up to \$16 a month, making a total of \$105 for basic living and special needs.

Reports based on very early experience under this changed law indicated that in November 1957 over 70,000 OAS recipients benefited by the change and received grants in excess of \$89. The average additional grant for those with no income was \$12.20 and over 28,000 of the recipients with no income received the maximum additional grant of \$16.

As an additional resource to improve the living standard, particularly for the aged with limited incomes the Legislature as of October, 1957, made available a Medical Care Fund from which certain medical needs could be met if the individual's income and grant was not sufficient.

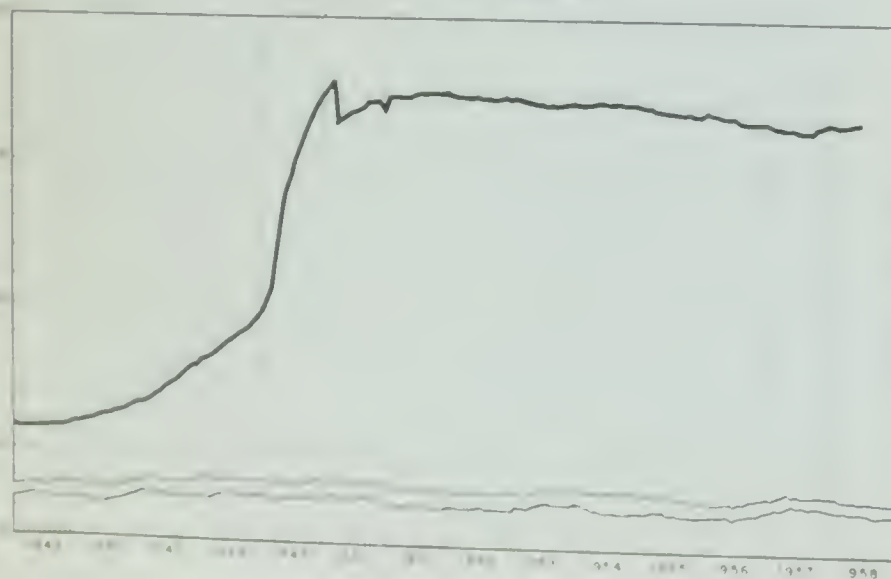
#### QUESTION BY A PAINTER

*It sounds as if all the problems were solved. Can we sit back and quit worrying? Or are there problems that were not solved by the new laws passed during the Legislature in 1957 which considered so many welfare bills.*

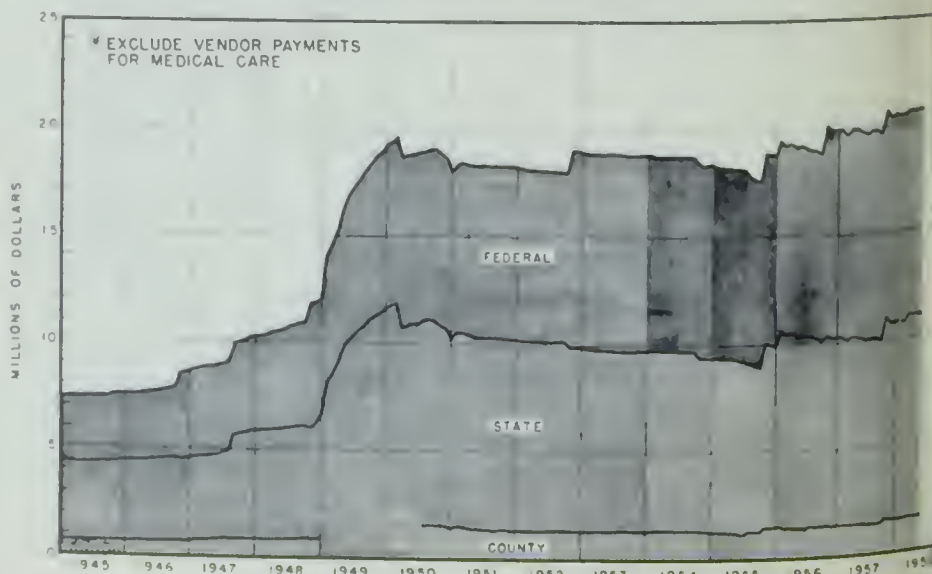
There are still many unresolved problems. One is presented by the aged person with limited income who requires some type of sheltered care such as that offered in a boarding or nursing home.

A recent survey of nonprofit homes and institutions for the aged indicated the average per capita cost of care was in excess of \$150 a month. Although the aged individual may require protective care, the standard of living is generally higher than that available to

STATE OF CALIFORNIA  
RECIPIENTS OF OLD AGE SECURITY  
BY MONTH, JANUARY 1945 TO JUNE 1958



STATE OF CALIFORNIA  
EXPENDITURES\* FOR OLD AGE SECURITY  
BY MONTH, JANUARY 1945 TO JUNE 1958





assistance recipients living outside institutions. Comparatively few recipients have sufficient income of their own to enable them even when receiving a maximum OAS grant, to purchase this kind of care. The question then arises as to how the needs of these people can be met and still maintain equity between the standard afforded them and that afforded recipients living outside institutions.

Another problem which affects many more aged recipients is that of money amounts allocated to individual items of basic need within the \$89 standard. Although, originally, many of these amounts were based upon current pricings, the \$89 ceiling has prevented realistic adjustments in line with changed pricings. Accordingly, the money amounts assigned to some of these basic needs do not reflect current pricings. Thus, there is the question of what action, if any, can be taken to correct this.

Other related questions currently under consideration by the department include: Is the content of basic needs now included in the standard realistic? What special needs of aged persons should be recognized under an assistance standard? Should the standard be based on an aged person living alone or one who lives as part of a family group? Can the standard be improved without legislation? If so, how? If not, what legislation appears desirable?

#### QUESTION BY A LANDLORD, WHICH IS ECHOED BY A BUTCHER, BAKER, AND AN ELECTRIC BULB MAKER

*I thought we were going to ask the questions, Mr. Director. Why don't you answer your own questions?*

The answer to those questions and many others is being sought by an exceptionally well-qualified advisory committee of prominent and interested citizens. A picture of them will be published on page 7 of this report.

They are devoting a great deal of time and study to the present standard of assistance and the question of what should be included in an adequate standard for aged people. The recommendations of this committee, which are not available for this report, should be ready before the end of the year. It will be invaluable in determining where we are, where we want to go, and how best to get there. This is just another step toward ultimate attainment of our common goal, i.e., that OAS will truly meet the need for economic security in old age and be of benefit to the entire community.

#### QUESTION BY A SALESMAN

*That doesn't seem to answer all the questions. Aren't there other issues that should be solved or at least worked on?*

Yes, there are other issues. In fact, there are many issues; however, the major issues as far as the OAS Program is concerned are as follows:

**Development of resources and programs for geriatric rehabilitation, i.e., medical and other programs**



The Adequacy of Grant Advisory Committee referred to on this page is shown above. They are, left to right, seated: Dr. Catharine Starr, Miss Margaret Kay Anderson, Judge Ben Koenig, chairman; Miss Catherine Bauer, and Dr. Emily Huntington. Standing, left to right: Dr. Wendell Griffith, Mr. Don Vial, Mr. William M. Burke, Mr. Mox D. Kossoris, and George K. Wyman, Director, State Department of Social Welfare.

designed to maintain or restore maximum ability for self-care among the aged.

Better quality services for OAS recipients in out-of-home care for those in need of such care, e.g., placement in boarding home or institution services by county welfare departments and then, continuing services to OAS recipients in out-of-home care by caseworkers.

Development or availability of community resources and programs that will help aged people to remain participating members of their communities, e.g., day centers, volunteer services, education opportunities, employment appropriate to ability, etc.

At this point it might be of interest to look at the public assistance dollar on page 36. It will show the source of the money and broadly, how it is expended. The chart of all the public assistance expenditures since 1945 is on page 36 and the trends of the recipients and expenditures for OAS are on page 6.

## AID TO THE BLIND

#### QUESTION BY RAILROAD ENGINEER

*You have one program that I am sure no one in their right mind would ever argue about—that is the help you give the blind. I know how much my eyes mean to me and I certainly don't begrudge a penny to help them. Now what about them?*

Aid to the Blind in California is really three social welfare programs. There is the Aid to Needy Blind (ANB) and the Aid to Partially Self-supporting Blind Residents (APSB) which are under the supervision of this department but are administered, as are other welfare programs, by the county welfare departments. The third program, Prevention of Blindness is administered directly by this department with the cooperation of the county welfare staffs.

The purpose of ANB is to provide monthly cash payments "to relieve blind persons from the distress



of poverty, to enlarge the economic opportunities of the blind, and to stimulate the blind to greater efforts in striving to render themselves self-supporting."

The APSB program was designed to make available monthly cash payments to the blind residents of this State whereby they "... may be encouraged to take advantage of and to enlarge their economic opportunities, to the end that they may render themselves independent of public assistance and become entirely self-supporting." Upwards of 10 percent of the recipients of this assistance are achieving self-support either permanently or for substantial periods.

The Prevention of Blindness Program provides treatments for applicants and recipients of aid whose vision can be restored or blindness prevented by treatment or operation. Surgeries are performed by private ophthalmologists in private hospitals.

### Decreasing Dependency

Problems of blindness and how best to alleviate them has been the area of major emphasis of the department during the past year in its work with county welfare departments.

With both state and federal legislative bodies stressing greater emphasis on services and self-support, every effort possible is made to encourage county welfare workers in their work with the blind, to encourage self-care, rehabilitation, and self-support, where feasible.

### Four-Day Seminar

Among the methods used to promote services and decrease dependency are:

A four-day seminar on "Modern Approaches in Work With the Blind" was cosponsored by the State Department of Social Welfare and the State Department of Education at the Orientation Center for the Blind in Oakland.

The Orientation Center has been able to achieve remarkable success with newly blinded persons in changing their attitude toward their future. Members of the seminar lived at the Orientation Center and were able to observe firsthand the problems of blindness. They were able to grasp the process by

which a blind person's attitude is changed from one of defeat to one of hope and confidence.

After four days at the center, every county welfare worker present was convinced that blindness need not be a crushing handicap and that the blind person can learn to care for himself, both physically and financially, with encouragement, proper training, and the opportunity for employment.

### Roundtable Sessions

Several roundtable conferences have been held with county social work staff handling Aid to the Blind. These sessions usually include staff members from three or four counties. These have proved most effective, as they stimulate thinking in regard to the problems of the blind and services that can be given by staff members. Also, they provide state and county staff with an opportunity for an exchange of ideas on mutual problems in administering the Aid to Blind programs.

### Special Bureaus for Blind

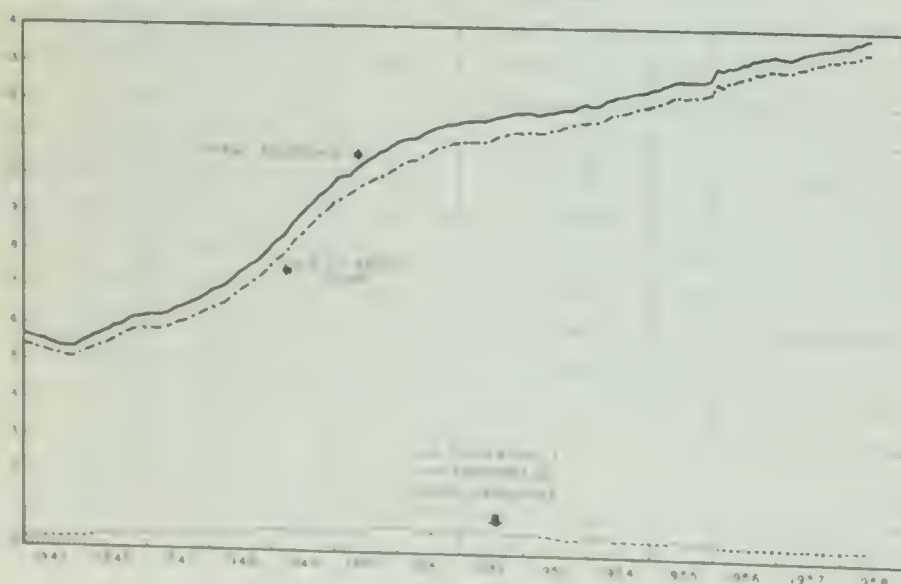
For many years this department has actively encouraged special bureaus to handle Aid to the Blind cases in those counties in which the caseload was 250 or more. (Provision for this is also required by the Welfare and Institutions Code.) Workers who carry only Aid to the Blind cases have more of an opportunity to learn the needs of a blind person. They develop a better understanding of the blind person's problems.

Another merit of having a bureau is that usually the supervisor of the unit supervises only persons working with Aid to Blind cases. Therefore, the supervisor becomes better orientated to problems of the blind and can give more effective guidance to workers.

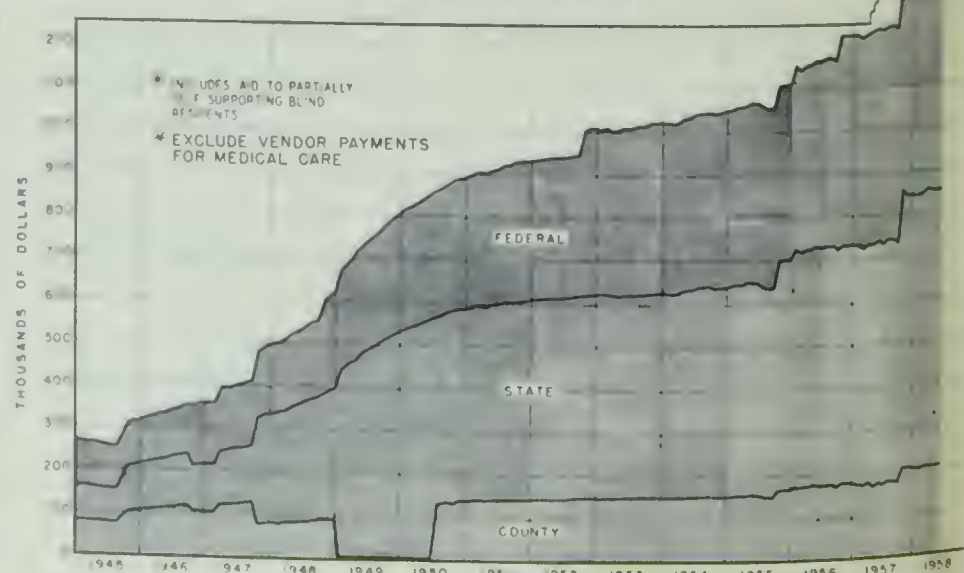
Counties with bureaus for the blind include Alameda, Fresno, Kern, Los Angeles, Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, and Tulare. These 13 counties have approximately 75 percent of the statewide Aid to Blind caseload.

During the past year many counties which do not have sufficiently large Aid to Blind caseloads to warrant a bureau have assigned all of the Aid to Blind

STATE OF CALIFORNIA  
RECIPIENTS OF AID TO THE BLIND  
BY MONTH, JANUARY 1945 TO JUNE 1958



STATE OF CALIFORNIA  
EXPENDITURES\* FOR AID TO THE BLIND  
BY MONTH, JANUARY 1945 TO JUNE 1958





cases to one or two workers. Again, as in the bureau, the worker handling a specialized caseload has more of an opportunity to learn the needs of the blind, and provide the services which will meet those needs most effectively.

### Report to Assembly

During the year, the Co-ordinating Council on State Programs for the Blind studied and made a report to the Assembly Interim Committee on Social Welfare on state services for the blind and proposed legislation referred for interim study. The Co-ordinating Council is composed of the directors of the State Departments of Public Health, Education, and Social Welfare.



County and state welfare staff, and Administrator of the Orientation Center for the Blind, who participated in the Seminar on Modern Approaches in Work with the Blind held at the center in Oakland, front row, left to right: Mr. Alfred Gil, Santa Cruz; Mrs. Ida Pigatt, San Bernardino; Mr. George Gazarian, San Francisco; Mr. Perry Sundquist, SDSW Sacramento; Mr. Allen Jenkins, administrator of center; Mrs. Willarene Haffman, Tulare; Mrs. Hetty Savy, Santa Clara. Back row, left to right: Miss Leara Ricketts, Alameda; Mr. Ed Wickwire, Kern; Mrs. Catherine Mahaney, Riverside; Mrs. Martha DeGriaznav, Fresno; Mrs. Hartense Tutelman, Los Angeles; Mrs. Ethelyn Welch, Sacramento; Miss Alice Russell, San Mateo; Miss Harriet Hicks, SDSW Sacramento.

The purpose of the study was to review the present method of providing services to the blind by the several agencies now involved and make recommendation for any changes in administrative setups which would provide for improvement in or increase of services to the blind.

### New Legislation

Twenty-four statutes were enacted by the 1957 Session of the Legislature which affected the Aid to the Blind program. The legislative change which was of the greatest concern to the blind recipient was that affecting the amount of basic grant—raising basic needs from \$99 to \$110.

The provision in the present law whereby the first \$11 of non-exempt income must be applied to meet basic needs is an attempt to bring the “have” and “have-nots” a little closer together, thus achieving a start toward more equitable treatment of recipients.

In other words, the person with income which could be applied to meet his special needs is now \$11 a month closer to the person who may have just as many needs but, unfortunately, no income with which to meet such needs.

Also, the new provision has the far more important effect of increasing the amount with which a needy blind person can purchase the necessities of life in a time when prices continue to spiral upward, even though he has no outside income.

Other major and very helpful amendments to the Aid to Blind Laws provide that an applicant's share of his wife's income shall be measured by the Relatives' Contribution Scale; enabled recipients of APSB to make principal payments to further their plans for self-support; shortened the application period; strengthened the procedure for a careful determination as to whether a blind person should be granted ANB or APSB; required full retroactive aid for any underpayment due to error or inadvertence on the part of the county; provided medical care for all recipients who lacked sufficient income with which to purchase such care; and abolished the requirement of county residence.

### Cases, Causes, and Costs

There was a net accretion of 408 recipients of Aid to the Blind (including ANB and APSB) during the fiscal year, or 34 a month. There was a total of 13,421 persons receiving Aid to the Blind as of June, 1957. As of June, 1958, the number had increased to 13,829, roughly a 3 percent increase.

The rate of increase in Aid to the Blind caseload is approximately three-fourths the rate by which the over-all population is increasing in California. The population of the State on July 1, 1957, totaled approximately 14,160,000. As of July 1, 1958, it had increased to 14,752,000, roughly a 4 percent gain.

Principal causes of blindness of ANB recipients in California, as revealed by reports of eye examinations, are as follows: pathology of the lens (which includes cataracts), 35 percent; damage to retina and choroid, 15 percent; pathology of optic nerve, 13 percent; glaucoma, 11 percent; damage to cornea, 11 percent. Degenerative conditions and varied other pathology accounts for the remaining causes of blindness.

The principal cause of blindness is the result of pathology of the lens, which is usually cataracts. Cataracts are most often found in persons in the older age brackets. When it is considered that 75 percent of the recipients receiving ANB are past 60 years of age, it is apparent why pathology of the lens is the principal cause of blindness.

Expenditures for the fiscal year to finance the programs for the blind amounted to \$17,339,347. The assistance payments, including Medical Care, amounted to \$15,926,553.

### Examinations

As of June 30, 1958, there was a total of 655 examiners for the ANB program throughout the State—435, or 66 percent being physicians skilled in diseases





It's a wonderful feeling for Mrs. J to see and to reach out and catch a ball when she plays with her two children. Mrs. J is able to see once again as the result of corneal transplants under the Prevention of Blindness Program. Corneal transplant is a specialized type of surgery requiring great skill. The operation on Mrs. J's left eye improved her vision from being able to count fingers two feet in front of her to visual acuity of 20/40. The operation on her right eye, performed at a later date, improved her vision from 20/2800 to 20/40 plus 2.

of the eye, and 220, or 34 percent being optometrists who meet the qualification requirements. This is the highest number of examiners ever available and represents a 14 percent increase over two years ago.

### Applicants

During the fiscal year a total of 10,079 eye examinations were made by examiners for the ANB program, or approximately 850 examinations were made a month. Of the examinations, 6,148 were made on applicants applying for aid. Of this number, 3,246 were found to be eligible. In other words, about one out of every two applicants is found to be eligible for assistance on the basis of visual acuity. The remainder of the examinations were made on recipients to determine continued eligibility to aid or to determine feasibility of surgery under the Prevention of Blindness Program.

### Prevention of Blindness Program

The Legislature recognized that there are in California many blind persons, among applicants for and recipients of ANB, whose vision could either be restored or further loss of eyesight prevented by adequate treatment.

The Prevention of Blindness program, designed to prevent blindness or improve or restore vision, has immeasurable value to the individual and to society. To the blind person, the effect of successful treatment is well-nigh inspirational. To the public, the program is of great value in that it usually decreases physical and social dependency. In many instances a blind person whose vision is improved or restored is no longer dependent on aid.

Table A shows the types of surgeries performed on needy blind individuals during the fiscal year.

TABLE A  
Surgeries Performed Under Prevention of Blindness Program for 1957-1958

Nature of Surgery	Number
Total	236
Cataract	215
Discission	7
Pterygium	4
Retinal detachment	2
Glaucoma	2
Corneal transplant	2
Miscellaneous	4

Table B shows the age range of the men and women receiving surgery under the Prevention of Blindness program during the year.

TABLE B  
Age and Sex of Persons Receiving Surgery During 1957-1958

Age range	Total	Male	Female
Total	236	116	120
Under 51 years	3	3	0
51 through 60	28	22	6
61 through 70	48	28	20
71 through 80	103	39	64
81 through 90	52	23	29
Over 90	2	1	1

### Glaucoma Treatment

Although both Medical Care Trust Fund and Prevention of Blindness Program provide for medical care for recipients of ANB, the type of service differs materially. The Medical Care Program primarily provides for examinations and/or treatment in the doctor's office; whereas, the Prevention of Blindness Program is essentially a surgical program necessitating hospitalization of the patient.

Agreement was reached that glaucoma treatments would be provided under the Medical Care Fund rather than under the Prevention of Blindness Program. This decision was made as there has been a longstanding policy in the Prevention of Blindness Program that glaucoma treatment would be provided only if it is not locally available to the patient, either through his own resources or through community facilities. This policy is based on the conviction that local responsibility promotes more regular observation and treatment as well as better follow-up which is so essential in treatment of glaucoma.

### The Oldest One

Mr. A, who was born in 1860, may be old in years, but he is young in spirit these days. His sight has been restored.

Cataract surgery is not readily undertaken for a patient who is approaching the century mark, but Mr. A knew he would make it and he was able to convince the doctor that he was a good risk. Not only is Mr. A the oldest patient ever accepted for eye surgery under the Prevention of Blindness Program, he is also one of the most successful.

Before surgery Mr. A's sight had failed to the point that he could distinguish only light from dark. His poor eyesight made it impossible for him to continue doing the fine cabinet work and furniture refinishing which had been his means of earning a livelihood



throughout his working years. No longer was it possible for him to help his wife with little chores about the house. It was difficult to care for his roses. All of this was hard to take for an alert, intelligent, and independent fellow.

But successful surgery has changed all of that now for Mr. A. His vision has been restored to 20/25. This is nearly normal vision. Normal vision is 20/20. Once more Mr. A has assumed his role as head of the household. And, he just might go back to work refinishing fine furniture.

Trend charts of the recipients of Aid to the Blind and the expenditures are on page 8.

## AID TO NEEDY CHILDREN

### QUESTION BY NEWSPAPER REPORTER

*You have a program that is very newsworthy—judging from the number of times it breaks into print. You know, the one for the children. What's the background on it?*

That is the Aid to Needy Children (ANC) program. The number of children and their parents or caretakers, in other words the caseload, started to show an upward trend late in 1956 and it has increased sharply throughout the 1957-58 Fiscal Year. The number of children aided in June, 1958, was 186,942 as compared with 155,698 in June, 1957, an increase of about 20 percent.

Not only did the caseload increase in terms of number of children aided, but for the first time since 1951 there was a significant increase in the recipient rate. In 1951 approximately 44 per 1,000 of the State's population under 18 years of age were receiving ANC. By 1957 this figure had dropped to about 33 per 1,000; but by June, 1958, it had risen again to almost 38 per 1,000.

Aid payments increased from slightly over 89 million dollars in 1956-57 to more than 107 million dollars in 1957-58, an increase of 20 percent.

The average monthly grant for family cases (\$146.80) in the last six months of 1957-58 was \$9.46 higher than in the corresponding period of 1956-57. The average grant per child in family cases increased from \$50.41 to \$53.41. These grant increases resulted primarily from: (1) a decrease in outside income available to ANC families because of general economic conditions during the fiscal year; (2) the general increase in living costs which were reflected in increased allowances for the basic essentials in the ANC standard; and (3) an increase in the maximum State participating base which became effective on October 1, 1957.

The average monthly grant for children in boarding homes and institutions in the last six months of 1957-58 was \$65.72 as compared with \$62.69 in the same period in 1956-57. This increase reflects the rising costs of foster care during the year and an increase effective October 1, 1957, from \$67.50 to \$75 in the amount in which the State will participate.

### QUESTION BY A BANKER

*In other words, economic conditions, increasing population and upward spiralling costs of living are reflected in this program. But that doesn't tell us who these children are and just what this children's assistance program is all about.*

Aid to Needy Children is a family service program. In the greater number of cases, the children are living with a parent or parents; a primary goal for all of the children is to enable them to grow and develop in as normal a family setting as possible. Services and financial assistance are provided as needed in order to fulfill this objective.

Since the welfare of a child is inextricably bound up with that of the family group to which he belongs, it may throw some light on the aims and problems of the program to consider the various types of family patterns and other living situations represented in the Aid to Needy Children caseload.

As to the living arrangements of these children: there were approximately 187,000 children receiving assistance of whom about 11,000 were in boarding homes or institutions, about 16,000 were with their grandparents or other relatives. Of the remaining children an estimated 160,000 lived during the past fiscal year with either a parent or parents of whom 125,000 lived only with the mother, 18,000 with the mother and stepfather, and 16,000 with the mother and father one of whom was incapacitated.

Each of the situations represents a "disrupted home" since, in order to be eligible for ANC a child must not only be "needy," but must also have been deprived of the support or care of one or both parents by reason of death, absence, or incapacity.

Many of the problems of these deprived families and children are closely related to the family pattern as well as to the circumstances which resulted in the particular living arrangement. The largest group of families are those in which the mother and children are living alone. All of these families have problems in common in that the mother must assume a father's role as well as her own in meeting the social, psychological, and economic needs of the children. In addition, where the father is dead; or has left the home but is available for family and support planning; or has disappeared; or where he is in a penal or mental institution, there are other problems peculiar to the particular circumstances.

The situation of the unmarried mother living alone with her child may differ too, depending on the circumstances. Paternity may or may not be known or acknowledged—the relationship may have been a very casual one or may have been relatively stable and comparable to an actual marriage situation.

In the group of cases in which the child's parents are living together, the need for ANC always arises from the mental or physical incapacity of one parent, usually the father. In these cases, the mother must often not only assume a father's role in meeting the emotional and economic needs of the children, but care for and meet the needs of the sick or disabled father as well.



The family consisting of the mother, stepfather, and children frequently has a difficult and delicate relationship problem to face, especially at the beginning before a family feeling has been established.

In an estimated 14 percent of the caseload the child is living either in a boarding home or children's institution or in the home of some relative other than the parent. One study made some time ago showed that an estimated 19 percent of the children in boarding homes and institutions had no family to return to; that is, both parents had deserted, were dead, or could not be located. The remaining parents have problems which make it impossible or difficult to care for the children in their own homes, or sometimes neglect the children to the extent that the courts find it necessary to remove the child from the home.

In addition to the problems arising from the various living arrangements and family patterns, families receiving ANC are subject to a wide variety of other problems resulting primarily from their economic and social status. A large proportion have lived over long periods on marginal income. Many have been forced to live in depressed areas in sub-standard housing on nutritionally inadequate diets.

In spite of these disadvantages, many of these people have managed to maintain a stable family and to be self-sustaining until some crisis—such as illness, accident, death, or the desertion of the father—made public assistance necessary.

Throughout the caseload, however, unfavorable environmental influences have created a wide range of emotional, physical, and social problems. Lack of vocational skills, unemployment, child behavior problems, lack of resources, physical, emotional, and mental health problems, alcoholism, illegitimacy, are all found to a wider extent proportionately among the families receiving ANC than in the general population.

#### QUESTION BY SAME BANKER

*Mr. Director, I would like to summarize that and if my summary is correct, ask another question. ANC is primarily for the benefit of children and to help children you must assist the family. In addition, as opposed to the old*

*age plan the assistance for children is very seldom a permanent situation. Families do, with the assistance of this program work their way back to fairly normal ways of living.*

That is correct, very few families remain on ANC for extremely long lengths of time. The ideal is to return them as rapidly as humanly possible back to what you term, fairly normal ways of living.

#### THE SAME BANKER

*Thank you. There must be hundreds of family situations and if that is so how does the State Department of Social Welfare through the county welfare departments decide on the assistance grants.*

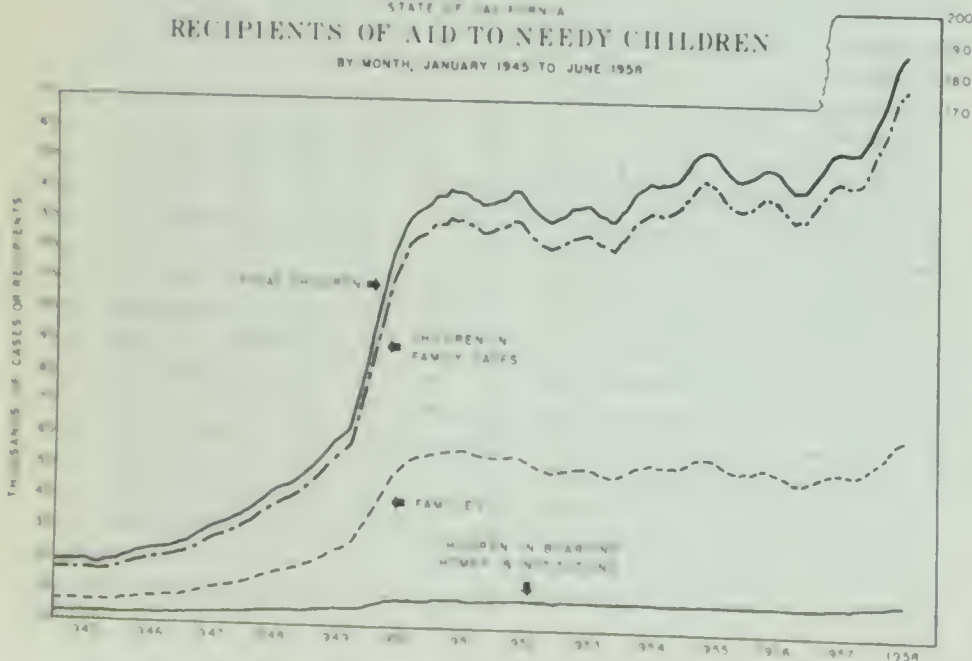
The ANC grant is determined on the basis of need in relation to available income. Need is determined on a budgetary basis depending on the size and age and sex composition of the family.

The monetary allowances for the basic budget items—food, clothing, personal needs, recreation, transportation, household operations, education, incidentals, and utilities—are included in cost schedules issued semi-annually. These are based on current prices for food, clothing, utilities, personal needs, and household operation supplies. The amounts for the other basic items are more or less arbitrary and are not revised periodically. A maximum amount is set for housing costs—whether rental or the costs of home ownership—for each county.

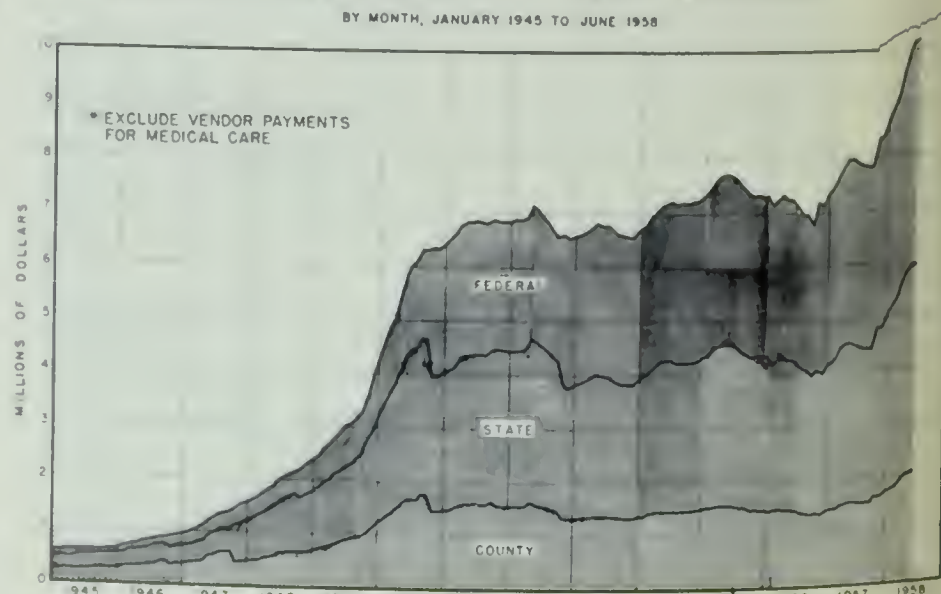
Additional amounts for basic items may be allowed under special circumstances. In addition, provision is made for allowing the cost of "special needs," such as essential household equipment, major housing repairs, telephone, housekeeping service, etc. when the county determines that the item is necessary.

During the past year several changes were made in the ANC standard of assistance. The age, sex and family groupings used in determining the monetary allowances for food, clothing, etc. were reduced from nine to four. A standard flat utility allowance regardless of the types of utilities used or size of family was established for each county. County housing ceilings, which were formerly "frozen" at the June, 1951, level,

STATE OF CALIFORNIA  
RECIPIENTS OF AID TO NEEDY CHILDREN  
BY MONTH, JANUARY 1945 TO JUNE 1958



STATE OF CALIFORNIA  
EXPENDITURES\* FOR AID TO NEEDY CHILDREN  
BY MONTH, JANUARY 1945 TO JUNE 1958





may now be changed at the request of the counties based on their current experience.

### ANC Program Issues

The basic issues which are of current concern to both the public and administration are: the rising caseloads, increasing costs, the behavior of some ANC recipients, and the eligibility of families with common-law stepfathers.

Along with rising caseloads and costs there is increasing concern that in many cases the aid payments are not being properly spent for the children's welfare; that ineligible persons may be receiving aid; and that the receipt of ANC may actually be increasing rather than solving dependency. This concern arises primarily from the relatively small number of instances that reach the headlines of fraudulent receipt of aid, spending of aid payments on luxury items, sexual promiscuity, alcoholism, and other behavior that is symptomatic of deeper underlying problems in the general community, and not limited to welfare recipients.

The ANC caseload consists in large part of chronic or complex cases of dependency compounded by environmental factors. This being the case it is not surprising that some instances of anti-social behavior will be found within this group. **That this is so is one more factor in pointing up the urgent need for the continuing development of casework and counselling services in the ANC program, for working closely with other agencies in the community concerned with the same problems, and for stimulating the development of additional resources directed not only toward the rehabilitation of families and individuals, but also toward the prevention of dependency.**

Over the past few years a major part of administration effort has been directed toward making a more effective program of rehabilitation and prevention possible. There have been, and still remain, a number of obstacles in the way of providing a program of services to all of these families and children who need them.

One obstacle has been the large amount of "paper work" and procedural detail required in establishing eligibility and determining the amount of grant, thus leaving little time for studying each family's situation, and getting to know what the specific problems are, let alone providing or arranging for essential services to meet the problems.

### QUESTION BY A TAXI DRIVER

*Stop right there! If there is so much "paper work" why aren't you doing something about it? All my life I've heard about government paper work and red tape. Something should be done about it!*

Something is being done about it. A major project for the past two years has been what is known as "ANC simplification." A joint state-county committee studied all aspects of the problem of procedural complexity in eligibility and grant determination, arrived at solutions, and devised a number

of simplified procedures which are expected to significantly reduce the amount of worker time in determining eligibility and the amount of aid.

In brief, the changes consist of: **A simplified recording system; the uses of tables to simplify certain computations; a standardized method of computing net income from earnings; a new standard and simplified procedure for determining the financial liability of a stepfather in cases where a child is living with his mother and stepfather; and a new budget planning method to reduce the number of overpayments and the necessity for subsequent grant corrections.**

These new procedures became effective in 1958, and the results in terms of releasing worker time for services should begin to be apparent during the next year.

Another factor making it difficult to provide needed services to ANC families has been a shortage of qualified personnel in relation to the needs of the ANC program.

The fourth issue mentioned in the opening paragraph has to do with the eligibility of children living with their mother and "common-law stepfather." Through regulation, the man associated with the mother in the role of a spouse to the extent that a relatively normal family life for the children results is considered a financial resource to the same extent as though he were married to the mother.

The Department is convinced that this regulation is basically sound. However, difficulties arise in many instances in determining if a marital and family relationship actually exists to the extent that the child is provided with essentially a normal family life. This difficulty can only be solved in the individual case by a thorough study and evaluation of the situation. Such a study not only requires experience and skill, but also more time than might be available to the worker with a heavy caseload. This, again, points up the need for obtaining adequate staff, and for re-evaluating workloads in the light of program requirements.

The above are some of the main issues arising from the ANC program, and some of the steps the Department is taking to resolve the problems presented. Following are some of the recommendations being considered by the Department for future action:

To develop a statewide study similar to the award-winning Marin County project, directed toward measuring the effect of ANC on recipient families and children and on the community, and to determine long-range program and administrative needs to improve the ANC program.

To define the areas of concern of the legislature, boards of supervisors, and general public. To formulate methods for obtaining data to clarify these concerns.

To continue to study policies and procedures with a view to further simplification.

To continue to stimulate the development of casework practice in relation to the needs of the ANC program.



The trend charts of ANC expenditures and the caseload are on page 12.

## AID TO DISABLED

### QUESTION BY AMBULANCE DRIVER

*That's really wonderful for the children—but what about these disabled people who are really out of luck? I see many of them in my work and I can testify that whatever you want to do for them won't be too much. By the way, why did it take so long to get help for the disabled?*

Aid to the Needy Disabled (ATD), the new assistance program went into effect October 1, 1957. Many fears had been expressed during the years when this program was considered by the Legislature that it would be too costly because there would be so many people applying. The Legislature, therefore, defined disability very strictly and the department estimated on that strict definition that there would be 13,000 cases accepted during the first nine months. Actually, the estimate proved generous, since as of June 30, 1958, there were only 3,200 people receiving aid. The caseload has become fairly stable with about 400 new cases every month and about 50 cases discontinued each month.

### Who Are the Disabled?

The recipients of this assistance are a very disabled and deprived group of persons. Of the group accepted in this first year the average age was 51 and half have never married. Because of their physical or mental condition most of them live with friends or relatives. About one-fourth were in county hospitals.

Almost half of the recipients were dependent on county general relief before qualifying for ATD. Of those receiving aid, three-fourths have no income other than the assistance grant. Very few had any real property and over two-thirds had no personal property.

The disabilities most frequently found among ATD recipients are cerebral and spastic paralysis, arthritis, and mental deficiency with 70 percent of the disabling conditions due to disease and 20 percent to congenital birth causes. Three-fourths have been disabled five years or more; two-fifths have been disabled over 20 years.

### Assistance

The law provides that the maximum amount a disabled person may have is \$105 and his grant and income together may not exceed this amount. A standard was, therefore, established allowing for the basic needs common to all persons, that is, food, shelter, clothing and incidentals and then small money amounts are allowed for drugs, sick room equipment and the special services which seriously disabled people need for everyday living.

The department had estimated the average grant for the group would be \$85 a month. Actually, as of June 30, 1958, the average payment was \$77.



An important and very necessary part of the Aid to the Disabled program has been and is continuing to be the Aid to the Disabled Advisory Committee which is composed of interested California citizens. They are, left to right, seated: Mrs. Elizabeth E. Payne, Mrs. Constance L. O'Brien and Mrs. Lillian Sattinger. The gentleman standing on the far left is Mr. George K. Wyman, Director of the State Department of Social Welfare. The others standing left to right, are: Mr. Charles C. McGonegal, Dr. Seymour Kolko, and Dr. Lean Lewis.

### What Are the Problems?

The recipients of ATD are not included in the State's medical care program. (The ATD law was passed after the Medical Care law during the last regular session of the Legislature and was not included in the Medical Care bill.)

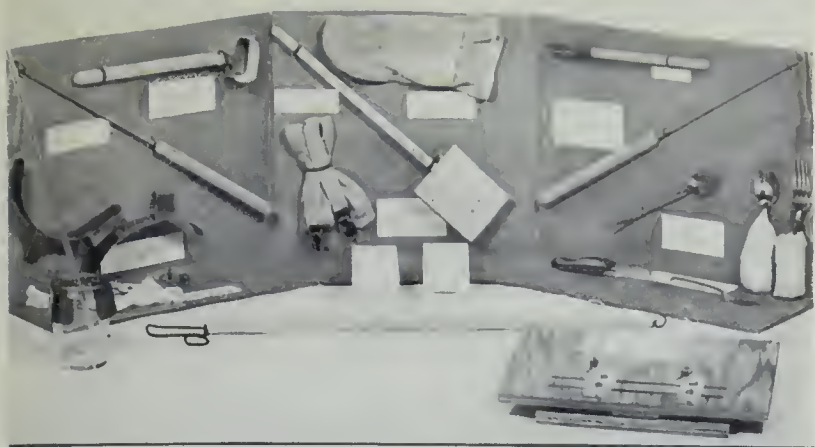
Experience has shown that they probably have a greater need for medical care than the other recipient groups. Although, many are in hospitals and receiving good care, there is no satisfactory way for all of those who are at home to receive services from physicians and nursing care. Attention should be given to a plan for medical care for this group. However, it will be more costly than that of the other assistance recipients, many of whom are in good health.

Because of the money limitation on the standard of assistance there is no provision for housekeeping attendant or nursing services for the seriously ill or crippled person. Therefore, it has not been possible to transfer from county general assistance some persons whose needs are in excess of \$105 and these people must still be cared for by county or voluntary agencies.

Nine months of experience in the ATD program has shown that while this group of recipients have very limited potential for vocational rehabilitation, there is much that can be done to help them achieve self-care. In some instances, this could result in the release of able-bodied persons in the home for full-time employment, thus reducing assistance costs.

ATD recipients are a disadvantaged group. Many have lived below a subsistence level for a long time. They need not only medical but also social, rehabilitative and restorative services to prevent further physical and mental deterioration. The department plans in the coming year to work with



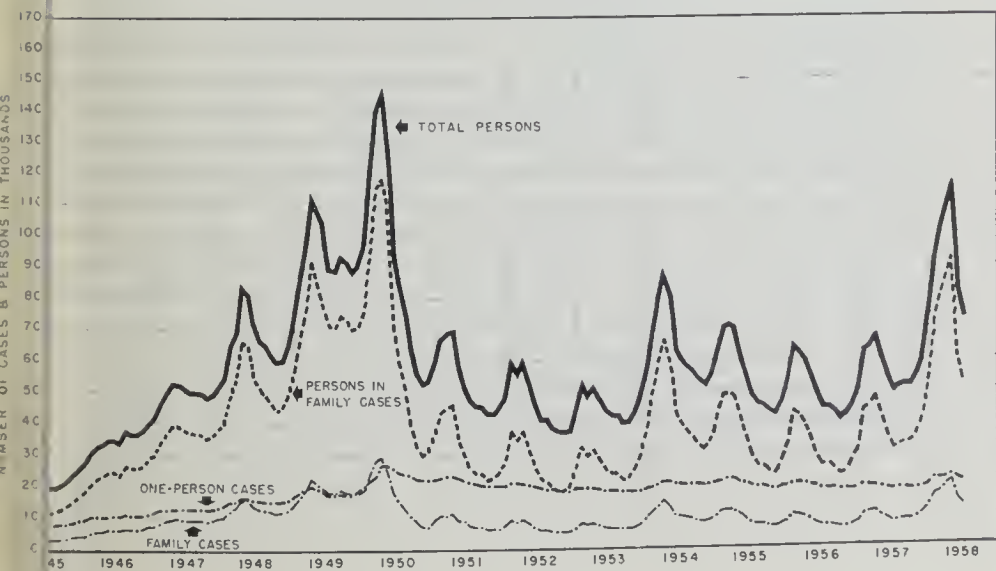


As in all social welfare programs there is much more to assistance than the aid grants of money. Many people need to be assisted in ways of living, counseled on behavior and many other human problems to help them back to normalcy. In the Aid to the Disabled the portable exhibit in the upper picture was used to show the possibilities of helping disabled recipients overcome some of the restrictions of their physical limitations and to somewhat relieve their dependence on others. In the bottom picture the same exhibit is shown folded in a convenient easy to carry grip size package. Dr. Lean Lewis, a member of the ATD Advisory Committee, and the Director of Rehabilitation Services, Fairmont Hospital, Alameda County, made the exhibit possible.

STATE OF CALIFORNIA

## RECIPIENTS OF GENERAL HOME RELIEF

BY MONTH, JANUARY 1945 TO JUNE 1958



county welfare departments in developing awareness of these needs and in stimulating action toward meeting them.

## GENERAL RELIEF

## QUESTION BY BUILDING CONTRACTOR

*All those programs should just about take care of everyone. But what is this General Relief you have on the list?*

The General Relief programs in California provide assistance for indigent persons not eligible for the categorical aids. Both the administration and financing of General Relief are entirely the responsibility of the counties. Eligibility requirements as well as standards of assistance vary from county to county.

General Home Relief—aid in cash or kind to indigent persons in their own living establishments—represents the bulk of General Relief caseloads and expenditures. General Relief also includes assistance in the form of boarding home care, some medical and dental care and hospitalization, burials, emergency aid, transportation to place of residence and supplemental aid payments to recipients of Old Age Security, Aid to the Blind and Aid to Disabled.

General Relief caseloads tend to be closely correlated with unemployment, both in seasonal fluctuations and longer term trends. The total number of persons receiving General Home Relief was higher during every month of 1957-58 than in the corresponding months of 1956-57, the disparity increasing throughout the year.

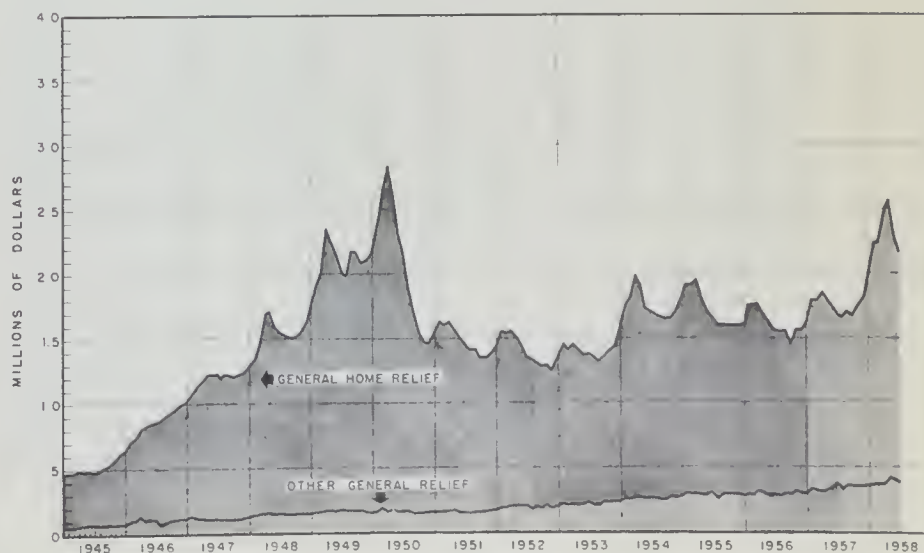
The average caseload in the first quarter of 1957-58 was 19.4 percent higher than during the same quarter of 1956-57, and in the last quarter of 1957-58 was 64 percent higher than in the corresponding 1956-57 quarter, a pattern of increase quite similar to that in the volume of unemployment in California during 1957-58. Total persons receiving General Home Relief in 1957-58 varied from 51,144 in July, 1957, to 114,405 in April, 1958—the highest caseload since April, 1950.

Family cases accounted for most of the rise in General Home Relief caseloads and expenditures

STATE OF CALIFORNIA

## COUNTY EXPENDITURES FOR GENERAL RELIEF

BY MONTH, JANUARY 1945 TO JUNE 1958





during 1957-58. Although the total number of persons receiving General Home Relief was 46 percent higher and total General Home Relief expenditures were 25.2 percent higher than in 1956-57, persons in family cases were 68.4 percent higher and expenditures for this group were 59.4 percent higher than in 1956-57. Caseloads and expenditures for one-person cases were up only about six percent.

Expenditures for General Relief totaled \$24,718,407 in 1957-58. Of this amount \$20,233,572 was spent for General Home Relief. Average monthly grants showed little change for one-person cases, but the average monthly grant per family case rose from \$61.17 in June, 1957, to \$66.43 in June, 1958, partly due to the increase in average number of persons per family.

### MEDICAL CARE

#### QUESTION BY HARDWARE MERCHANT

*In your list of programs you have a medical care program. As I recall, there has been quite a bit of controversy about that program in the newspapers. I imagine you have some trouble with every new program?*

To a certain extent you are right, everyone has some difficulties with anything new. But an erroneous impression should be corrected at this point. Medical care for recipients of assistance is not new. Only the Medical Care program, which is in reality an additional resource for payment of medical care, is new.

Medical care has been available in the past for many recipients of assistance—if they had income other than their assistance grant to pay for that care or if they were fortunate enough to live in communities where free public or private service was available. The recent change in an assistance law did make up to \$16 available for recipients whose income, other than the aid grant, was less than that.

There is a statement in the 1956-57 Annual Report of this Department which bears repeating at this point, “. . . Although care was always recognized as one of these necessities, there was a strong tradition that welfare agencies concern themselves primarily with shelter, food, clothing and social needs, while separate health agencies assumed responsibility for medical needs.” and “. . . Needy persons who receive money to purchase medical care often tend to apply this money to needs or wants. In 1950, therefore, the United States Congress amended the Social Security Act to permit payment for medical care to be made directly to vendors (individuals or agencies who supply medical care). This included permission to establish so-called ‘pooled funds’ operating on the insurance principle.

“In 1956 the Social Security Act was further amended to provide that federal funds would match state and or local vendor payments (or premium deposits up to an average of \$3 per adult recipient and \$1.50 per child recipient each month.” With the

State of California matching the federal funds a total of \$6 for each adult and \$3 for each child recipient was deposited in an insurance-type pooled fund.

In the question about this program there was a mention about controversy. An answer to that might be obtained from the following quotations from a statement made to the Senate Interim Committee on Social Welfare on June 24, 1958.

“. . . While the program has been successful overall, this is not to imply that we haven't had problems or that we have solved all of them at this time.

“. . . Governor Knight after consultation with representatives of the California Medical Association, proposed to the 1957 Legislature that California take advantage of (the federal subvention of funds for medical care) this opportunity to provide additional medical care for needy people.

“Assembly Bill 679, with 47 coauthors, was introduced to carry out this purpose. After only minor amendments and without opposition of any kind, it passed both houses unanimously. It was signed into law to become effective July 1 and operative October 1, 1957.”

When the State Social Welfare Board, in September, 1957, adopted the necessary regulations to implement the law, the following features characterized the program:

Services available included the complete gamut of medical, osteopathic and chiropractic care normally furnished in the practitioner's office or the patient's home, together with customary ancillary services.

Not included, for reasons of economy and/or availability of service elsewhere, were maternity care, treatment of mental illness, tuberculosis and venereal disease, as well as X-ray and radium therapy.

Control on quantity and propriety of care was attempted by the requirement that care beyond a certain quantity or cost must have prior approval of the administering county.

Dental care available to adults was limited to emergency care necessary for the relief of pain or the elimination of acute infection, but children in the age brackets from 5 through 12, inclusive, were entitled to such complete dental care as would prevent tooth loss, short of orthodontic or cosmetic service.

Maximum allowances for payment of service were established at approximately 80 to 90 percent of the statewide rates charged low income patients, except for public or voluntary facilities whose maxima were set at approximate cost.

Counties were required to employ medical and dental consultation for the evaluation of treatment proposals and the maintenance of relationships with the medical and dental professions.

Counties were permitted to contract for medical audit services with the California Physicians' Service, the California State Dental Association Service and the California Pharmaceutical Association; these contracts, patterned after a state-approved master agreement, provided that these services would be performed on a “no-loss, no-profit” basis. Thirty-five



counties, comprising approximately 40 percent of the State's caseloads entered into a contract.

As the October 1, 1957, deadline approached both State and counties spent considerable time in the design, printing and stockpiling of forms; furnishing program information to recipients and practitioners; in recruiting necessary medical, medical-social and clerical personnel, and in setting up the necessary procedures. The various professional organizations rendered valuable assistance in this phase of the preparation.

Shortly after the program became operative the need for certain policy modifications became apparent, especially in the field of drug therapy. The rules required that the practitioner must obtain authorization before prescribing drugs not contained in the U. S. Pharmacopoeia, the listing of New and Nonofficial Remedies or the National Formulary. This requirement was found to interfere frequently with the doctors' customary practice; on recommendation of the advisory committee the State Social Welfare Board repealed this rule effective December 1, 1957.

**By the end of the fiscal year the program had been in operation nine months. An inventory of observations as of that date presented the following picture:**

Several local medical societies registered objection to a medical program which, in their opinion, injected government as a third party into the confidential doctor-patient relationship. They recommended, in some cases, that their members do not participate. As a consequence, in a few areas of the State recipients of aid were made to depend on public medical facilities (not always conveniently located), had to pay for services, or had to accept service on a charity basis.

In May, the House of Delegates of the California Medical Association went on record as rejecting the principles incorporated in Assembly Bill No. 679, but urged support in improving the program. Basic recommendations were for county autonomy in administration involving close cooperation with local medical societies, a uniform method of payment, removal of the requirement of prior authorization, and that the Governor appoint one or more physicians to the State Social Welfare Board.

Local dental societies registered no objection to the program, and utilization of dental services by recipients showed a gradual increase. Some dental groups had gone on record as preferring direct vendor payments for all services rendered by the profession.

Osteopathic societies had registered no complaint and the president of the Osteopathic Association publicly stated that the program had filled a need, but recommended removal of the prior authorization requirement.

Other practitioner groups have expressed support of the program, recognizing the unmet needs for needy groups prior to October 1, 1957. Recommendations for administrative changes have been welcomed and acted upon, whenever possible.

**Of major significance in the administration of the program has been the requirement of prior authorization by the county medical or dental consultant**

before certain services could be rendered with approval for payment. The State Social Welfare Board, at the suggestion of the California Medical Association and with the advice of the statutory Advisory Committee on Medical Care, adopted a resolution enabling the department to experiment with the elimination of the prior authorization as a condition to payment for medical and remedial services.

The project was initiated on April 1, 1958, in cooperation with San Joaquin, Sacramento, Kern, and San Diego Counties (representing approximately 12½ percent of the State's caseload) and with representatives of the medical, osteopathic and chiropractic professions.

At the end of the fiscal year, findings had not been consolidated. Preliminary evaluation of the experiment, however, pointed toward the need to modify current requirements provided adequate controls could be established through local professional committees. Recommendations will be based on results of the study early in the Fiscal Year 1958-1959.

A second demonstration project was authorized by the State Social Welfare Board to allow an experiment with the University of California Medical Center at San Francisco to render services at cost by use of an all-inclusive fee per clinic visit. All administrative planning was completed and procedures agreed upon so that the project could be initiated July 1, 1958.

The Senate Interim Committee on Social Welfare held meetings in San Diego and Los Angeles in June, 1958. Opportunity was given to practitioner groups and recipients to express themselves regarding the program. Further hearings were scheduled for July in San Francisco.

At the end of nine months of operation, it is evident that this program is providing needed medical service and other remedial care to the needy aged, blind and children. Although the program is still in the initial phases, many administrative difficulties have been eliminated and measures are being taken to alleviate the complaints which have been registered.

There have been four basic problems. The first is the complaint of "third party" control. Measures are being taken to develop methods to assure maximum service to recipients, guarantee fiscal control and, at the same time, afford as much autonomy as possible to local government cooperating with local professional societies.

The second complaint has been around the dual method of payment. If the recipient has sufficient income to pay he does so directly; if not, the bill is paid from the Medical Care Trust Fund. Appropriate changes in federal law were recommended by Governor Knight and the Legislature to enable the State to amend the Medical Care Law.

The third area of complaint has been the schedules which determine the maximum amount payable for any procedure, for drugs, etc. Criticisms have been levied by professional associations that the fees are too low even though they are equal to or higher than other tax supported programs.



The fourth problem, mentioned above, is the refusal of certain practitioners to participate in the program. Constant interpretation is necessary to assure all practitioners that the objective is to provide the best possible care for needy eligible persons, without interfering with professional practice, and maintaining our responsibility as trustee for the taxpayers' funds.

Continuing efforts will be made to improve and simplify procedures and suggestions for improvement by practitioner groups will be supported. Administrative changes are expected to result from these suggestions.

Certain improvements cannot be effected without legislative change. Changes in the federal law which will become effective October 1, 1958, give the State greater freedom in determining how medical care will be provided. Accordingly, the following changes in state law are recommended:

**A provision to permit that the part of the assistance payment which is intended for medical care may be paid directly to the practitioner who furnishes the care.**

**An amendment to augment the Medical Care Premium Deposit Fund by payments for recipients of Aid to the Disabled.**

**A provision enabling the administering county, with the approval of the State Department of Social Welfare, to restrict from participation any practitioner who repeatedly violates the rules and regulations.**

## CHILD WELFARE SERVICES

### QUESTION BY SCHOOL TEACHER

*This item on the department's list of activities—Child Welfare Services, I thought the Aid to the Needy Children program provided services as well as assistance grants for the children. Isn't the ANC Program broad enough?*

Yes, ANC is a broad program but the department's programs affect the welfare of many children, both directly and indirectly. The decisions made by agency workers when children come to their attention affect to some degree the whole future life of these children. The workers, therefore, need the best possible preparation for understanding and helping solve complex social problems in accordance with the best interests of children.

The department receives some federal Child Welfare Services (CWS) funds which it has used to strengthen services to children. For example, these funds provide child welfare scholarships which have enabled a number of persons to complete their graduate education in social work as preparation for becoming child welfare workers. Persons granted these scholarships must show potential for child welfare work and agree to accept employment in a county welfare department.

These funds help to pay the salaries of child welfare staff in some counties, and also have paid for insti-

tutes or workshops for staff of county welfare departments and other community agencies to assist them in carrying out their child welfare responsibilities more effectively.

Child Welfare Service funds have made consultation available to local agencies. The department also has given much time and effort to assisting local county welfare departments to secure staff trained to deal with child welfare problems.

Child welfare workers help parents and children in a variety of ways. One way is work with parents who are so overwhelmed with the problems they face that they are unable to give their children adequate care. Help of this type is called protective services. It is a major defense against delinquency.

After State Legislation passed in 1955 and 1957 had clarified the right of county welfare departments to provide protective services, the department undertook to help communities and county agencies better understand such services and how to give them effectively. "A Guide to Protective Services for Children," was developed and widely distributed. The department also participated in several protective services workshops for county welfare department and probation department staffs and sometimes the staffs of other local agencies. The department field staff have given special attention to protective services in their contacts with local agencies.

One large city expanded its protective services this past year by setting up a cooperative community demonstration project, to which the county welfare department contributed workers. The county welfare department in another city established a protective services unit in its child welfare division.

A similar unit will begin operation in the child welfare division in still another county welfare department as soon as staff are secured. Several other counties are planning toward assuming responsibilities for protective services, or showing increased interest in doing so.

Child welfare workers also help when there are problems of parent-child relationships, or when a child's behavior gets him into trouble in school or in the community. The increasing number of requests for this type of service permits more preventive work.

The case of Don, aged 17 years, is an example. His school referred him to the child welfare division of the county welfare department because of concern about his lack of effort, irregular attendance, and failing work.

The child welfare worker learned that Don had done fairly good work through the eighth grade, but from the ninth grade on his work had been increasingly poor. His parents had been divorced about the time he had entered ninth grade. Not long afterwards his father had been hospitalized with a massive brain tumor. Since then he had been unable to give Don either financial or emotional support.

After the divorce, Don's mother had had several affairs with men. Don objected to the number of male visitors in the home whose purposes were obvious to an adolescent. Moreover, the mother identified



Don with his father, generally rejected him, offered him no supervision, and expected him to stay out of school to work and help support the family.

Don finally fled from this unhappy situation to the home of a friend his age. However, both boys had shown some delinquent tendencies which made them automatically suspect when delinquent acts occurred in their community. Don was not really welcome in his friend's home either, since he could not pay adequate board and room from his irregular earnings, and the family was not able to support another boy.

After the agency began paying his board and room Don ceased to feel like a beggar in the home, and the foster parents took more interest in him. He could use his own part-time earnings toward needed clothing and school expenses.

Since the child welfare worker has been seeing Don regularly, he has completed the eleventh grade successfully and his contacts with delinquent boys have ceased. A relationship has developed between Don and his worker based on Don's need to have a man with whom he can talk freely. Don is formulating his plans for the future more specifically and realistically. Besides providing financial support, the agency through the worker has given Don emotional support and help in understanding the situation regarding his parents and his relationship with them, together with direction toward desirable future goals.

Other typical duties of the workers include finding foster homes for children temporarily needing care away from their own homes, and adoptive homes for children who are free for adoption. Children are helped who must live away from their own parents to understand why this is necessary and to make adjustments to new surroundings.

Foster parents are helped to understand the behavior of the children who live with them, and how they can help to make this period a good experience for a child. Workers help unmarried mothers make sound plans for themselves and their babies. They also help persons considering the adoption of a child to consider whether they are ready to take on the responsibilities of parenthood.

In the final analysis, it is the citizens of every community who are responsible for seeing that the social services families and children need are available. The department has encouraged community planning of services for families and children. In some instances, CWS funds have supplemented local funds in supporting co-operative community projects.

Such a project acquainted one community with the need for adoptive homes for children of minority races, and thereby resulted in finding homes for a considerable number of these children.

In another community funds have been used toward support of a pediatric clinic to study the medical needs of children in foster care in the county. In one high delinquency area, Child Welfare Services funds partially support a delinquency prevention project.

## ADOPTIONS

### QUESTION BY A HOUSEWIFE

*In describing the Child Welfare Services adoption of children was mentioned several times. The Social Welfare Department seems an odd place for the adoption of children. But I suppose it is for their welfare. About how many adoptions in a year are there in California?*

For the first time in California petitions were filed in the superior courts for the adoptions of more than 10,000 children. This is more than one-tenth of all of the adoptions in the United States. The petitions filed represented three kinds of adoption placements.

### The Relinquishment Adoption

Of every 100 petitions filed, 24 were for children relinquished by the natural parents to one of the licensed adoption agencies. These children are placed with families previously studied and approved by the agencies. All of these petitions represented successful placements resulting in the legal completion of the adoption which usually occurs within a year.

### The Independent Adoption

Of every 100 petitions filed, 42 were for children placed directly by the natural parents with the family petitioning to adopt. A study and a report with a recommendation is made to the court by the State Department of Social Welfare or one of the licensed county adoption agencies. Such study is made only after the child is in the new home and an adoption petition is filed. Approximately one-fifth of these petitions fail to result in legal adoptions when the report is due six months later. This is due to the fact that recommendation of denial has been made, frequently because the child is not legally free for adoption, or the petition has been dismissed.

### The Stepparent Adoption

Of every 100 petitions, 34 are filed in behalf of a stepchild. In all of these petitions, one natural parent retains custody and control of the child while consenting to the adoption by his or her spouse. Figures are not available to show how many of these result in completed adoptions. The probation officer files a report and his recommendation with the court after completing a study of the family.

### Relinquishment Adoptions

The number of petitions filed for the adoption of children placed by licensed agencies is only part of the story of agency services to the children and their parents. In the past year adoption agencies served more children and natural parents than ever before.

At the beginning of the year, there were more than 1,900 children under adoptive study by the public and private agencies. In addition to this large group, agencies accepted more than 4,300 requests from natural parents to consider adoption plans.

Both public and private agencies provided case work services to natural parents to assist them in



making the best possible plans for their children. In about six out of every 10 requests, the children are placed for adoption. In the remaining four, services are terminated prior to adoption placement. In these instances other plans are made for the care of the children, for example: return to parents' care, placement with relatives or in foster home. Agency services to parents ensures that children are not separated unnecessarily from parents.

Statewide, while agencies were handling more requests to arrange adoptive placements, they received fewer requests to adopt children. There was a sharp decrease in the number of families indicating an interest in adopting children through an agency. In 1957-58, slightly more than 11,100 couples expressed a wish to adopt compared with more than 13,627 in 1956-57 and 11,529 in 1955-56.

There is probably a combination of factors responsible for such a decrease. Some agencies believe the decrease was directly related to economic conditions. This reason is partly supported by the fact that there was also a decrease in petitions filed in stepparent adoptions, and a relatively slight increase in independent adoptions. With unfavorable economic situation families may hesitate to adopt. This could be true particularly in relation to placements arranged by agencies, as many couples still have mistaken notions as to what an agency may expect of them in relation to their financial situation. Agencies require sufficient means to provide adequately for a child and to ensure continued care in the event of illness or death. However, some couples incorrectly believe it is necessary to own a home and to have a fixed amount of savings.

**Another reason for the decrease may be that families are discouraged about their chances of adopting a child through an agency. For more than a decade, newspapers, radio and magazine releases have reported that there are 10 or 15 applicants for every child to be placed by an agency. This is far from the truth.**

In California there are approximately four requests for each child placed. There is a fairly large group of children for whom there is not even one applicant. For such children, those of minority status, older children and children with health or medical problems, agencies must seek for adoptive parents.

The average time which may elapse between an application to adopt a child and the placement of a child with an approved family may vary from 7 to 11 months. For children for whom the agency must actively recruit adoptive parents, the time between the receipt of the application and placement may be only four to six months.

The Child Welfare League of America has indicated that agencies throughout the Country have experienced a similar reduction in the number of inquiries to adopt children. It is the opinion of some leaders in the field that this is the result of interpretation by agencies emphasizing the large number of applicants compared to the number of children needing placement.



*An adoptions procedure manual for attorneys and clerks of the court was developed by the Los Angeles County Superior Court, which handles more than 4,000 adoption petitions a year. This department assisted in the discussion and review of the material. Two Los Angeles adoption agencies, one public and one private, and the local probation office also participated. This is the first manual of its kind in the United States. In the picture of a presentation ceremony are, left to right, seated: Judge Lewis Drucker, coauthor, Superior Court Judge; Miss Lucile Kennedy, Chief, Division of Child Welfare, State Department of Social Welfare; and, Mr. Ettore Contini, coauthor, Chief of the Civil Judgment and Copy Division, county clerk's office, Los Angeles. Standing in the usual order: Judge Louis H. Burke, Presiding Judge of the Superior Court; Judge John Gee Clark, Presiding Judge of Adoption Court, Los Angeles County; Mr. John T. Martin, San Diego, Chairman of the State Social Welfare Board; Judge Ben Koenig, Municipal Court Judge, Los Angeles Judicial District, and chairman of the State Citizen's Committee on Adoptions; and Mr. Wymon, Director of the State Department of Social Welfare. All Superior Court judges are of Los Angeles County.*

The majority of the children relinquished to the adoption agencies are healthy white infants from about two weeks to three months of age at the time of placement.

However, in the past 10 years, the definition of the child who may be adopted has been greatly expanded. Today, any child who can benefit from being a member of a family is considered adoptable. Services have been greatly increased to find adoptive parents for children of minority status, older children and family groups, and children with serious physical or medical problems. Depending on the particular agency, one, two or more of every five children placed may be in one of these groups with special needs; special because an extra effort is needed on the part of the agencies to find adoptive parents.

The record of the placements made by the agencies in the State is outstanding with regard to the children served. An example of the services given is found in placements made by a private and a public agency. The Children's Home Society of California (CHS) is the only statewide private adoption agency. The Los Angeles County Bureau of Adoptions (LABA) is the largest public agency in California. Together these two agencies complete almost one-half of all of the adoption placements made by California agencies. In the past year\* the Children's Home

\* Calendar year 1957 for Children's Home Society—annual report; Fiscal Year 1957-58 for Los Angeles County Bureau of Adoptions.



Society placed 667 children and the Los Angeles Bureau of Adoptions placed 510 children including those of minority status as indicated:

	CHS	LABA
Mexican -----	70	69
Negro -----	39	94
Oriental -----	16	23
Mixed -----	22	18
	147	204

Children's Home Society also placed 32 children six years of age or older, including some in their teens. At least five of the older children for whom the Los Angeles County Bureau of Adoptions found homes were placed with younger brothers or sisters.

The CHS placed 48 children who had serious physical or medical problems. Monthly reports of the LABA showed that in addition to the 204 children mentioned above there were 64 children in the group with special needs; many with physical or medical problems. Some of the children placed by different agencies included several who were blind. One child with a hearing loss was fitted with a hearing aid very early in his life. There were children with congenital heart conditions, hip displacement and other orthopedic problems such as clubfoot. One child had hemophilia.

The difficulty in some situations was slow development which might be due to premature birth. There were infants with allergies or eczema. Some children were emotionally upset because of previous makeshift plans. All of these children particularly were in need of the love, affection and security that understanding adoptive parents were ready to give.

### Recruitment Activities

It is necessary for the agencies to search for adoptive parents for the children with special needs. This has been done in a number of ways and by using a great variety of methods. Agencies singly and in groups have used newspaper stories, radio spot announcements, television shows, movie shorts, and placards in busses to inform the public. Agency workers and board members have met with many groups such as churches, fraternal organizations, neighborhood

groups, councils of social agencies, schools and other special interest groups.

In Los Angeles and in San Francisco public and private agencies meet regularly to exchange information on recruitment activities and information on the children needing adoptive homes. If one agency knows of a family that may be considered for a child awaiting placement by another agency, the two agencies work together to arrange a placement.

When the agencies are still unable to locate families locally or through other agencies in the same area, there is a further resource, the Adoption Resource Referral Center. The center was established in the department in Sacramento in January, 1957, to increase available resources to serve these children. Adoptive families able and ready to provide homes for these children are registered. The center is able to put agencies in different parts of the State in touch with each other about suggested placements.

As a result of exchange meetings and the operation of the Adoption Resource Referral Center, there were 89 co-operative placements made by public and private agencies in the past fiscal year.

A child might be under the care of a public agency in the Sacramento area and be placed with parents studied and approved by a private agency in the southern part of the State.

A public and private agency located within Los Angeles County might work out a co-operative placement. Eight of these co-operative arrangements involved agencies in other states; plans were made through the Adoption Resource Referral Center for seven out-of-state children to be placed in California and one California child was placed by an agency in another state.

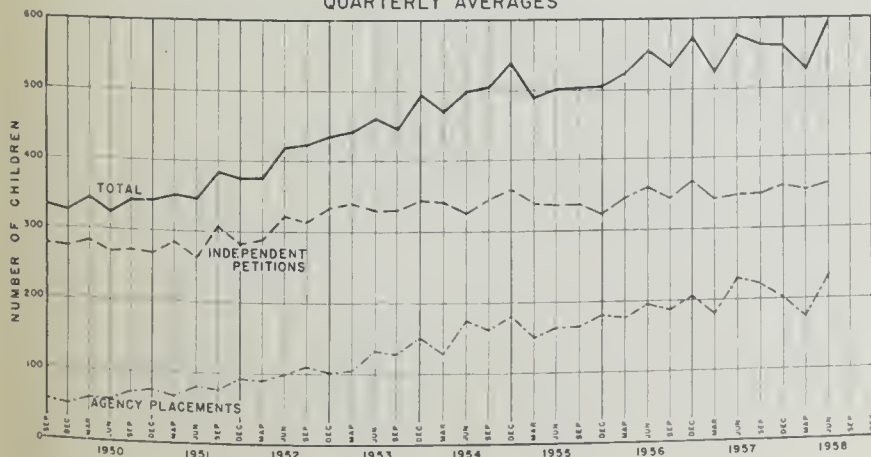
In addition to these, the Children's Home Society through its state organization makes all the resources of the agency available to each of its offices. In this way, 96 children were placed with families approved by a CHS office other than the one which had originally accepted the child for care.

Whenever it is necessary to find a home for a child an adoption agency may accept applicants outside the area it is licensed to serve. In the past year, in order

CHILDREN PLACED FOR ADOPTION BY  
LICENSED AGENCIES AND INDEPENDENT  
PETITIONS RECEIVED

JULY 1948 TO JUNE 1958

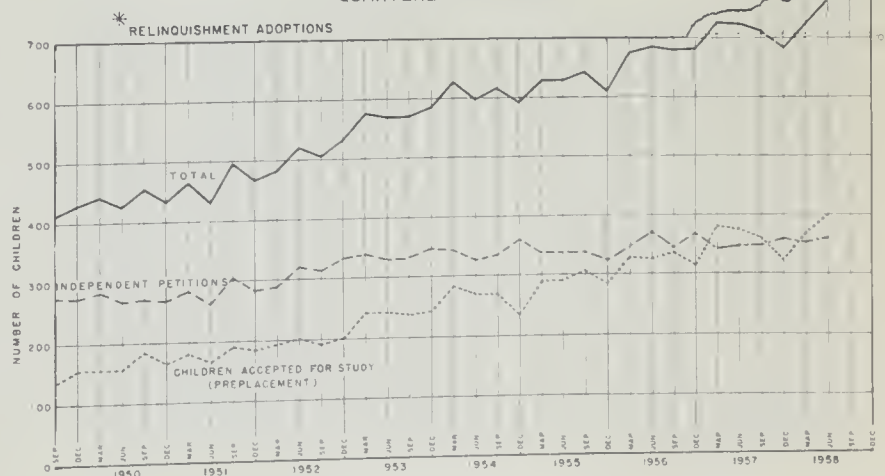
QUARTERLY AVERAGES



CHILDREN ACCEPTED FOR ADOPTIVE STUDY\*AND  
INDEPENDENT PETITIONS RECEIVED

JULY 1948 TO JUNE 1958

QUARTERLY AVERAGES





to find adoptive parents agencies placed 56 children outside the areas for which they were licensed.

The specialized recruitment activities engaged in demonstration projects were continued in 1957-58. These were MARCH! (Minority Adoption Recruitment of Children's Homes) in the San Francisco Bay area and the Joint Recruitment Project for Minority Adoptive Homes in Southern California. During this year MARCH! released a film, "**Eddie Gets a New Name**," produced by MARCH! its co-operating agencies and the Child Welfare League of America. This film tells about the placement of a Negro child with his adoptive family. A copy of the film has been made available to each agency and is being used with special groups to recruit families. It is also used to show interested families the process one couple went through from signing an application to the completion of the adoption.

The Joint Recruitment Project has studied the use of controlled releases to various newspapers to determine what releases bring the best responses. Both projects are concerned with evaluating the results of special recruitment efforts.

### Intercountry Adoptions

The department services to children in other countries were expanded in the fall of 1957 to assist children to enter the United States under the provisions of U. S. Public Law 316. This bill was passed by the Eighty-fifth Congress and signed by the President on September 11, 1957. It provided for the entry, within the following two years, of an unlimited number of children under 14 years of age from countries where the quota was oversubscribed. Responsibility for the administration of the law was placed with the Bureau of Immigration and Naturalization of the U. S. Department of Justice. Under the previous Refugee Relief Act applications were handled through the U. S. Department of State. This meant a complete revision in forms and procedures for handling of applications of couples seeking to adopt a child.

**The State Department of Social Welfare program for these particular children was terminated June 30, 1958, since money was not appropriated by the Legislature to provide services. The federal legislation terminates July, 1959.**

Most of the children served under this legislation are from countries such as Greece, Korea, Japan and a great number are in Hong Kong. In the nine months plans were completed for the placement of 84 children in California. Of these, 19 children arrived before June 30th and the other 65 were due at a later date. During the same period services were provided for 74 California families who were abroad and adopted children abroad prior to their return to the United States. This record compares favorably with the number of children and families served during the previous refugee relief program which was in operation from March, 1955 to June, 1957.

Some of these children were one and two years of age but many more were older children who had suffered deprivation and faced an uncertain future because of their rejection by their own groups. This

is particularly true for the Eurasian children whose fathers were U. S. servicemen and whose mothers were natives of Japan and Korea. Some of the youngsters came from the fearfully overcrowded orphanages in Greece—where \$10 must be spread to meet the needs of 30 children for a month.

There were 30 additional families approved for the placement of children but there was insufficient time prior to June 30th to secure the necessary information on clearance on the children. For these 30 children, the placement plans could not be completed to come to California. Some of these children were related to the families in California. The adoptive applicants in some instances had supported the children for several years while awaiting issuance of visas. Many of the children in Hong Kong come within this group.

The department continues to provide limited services as part of its regular adoption program to children in countries where the immigration quotas remain open or in nonquota countries. This has been a part of department services for many years. The small number served are not subject to the special federal legislation discussed above.

### Independent Adoptions

The volume of independent adoption petitions remain at about the same level as in the preceding year, with only an increase of 51 more petitions filed—slightly more than one percent. The disposition of completed studies remains practically constant from year to year. Of every 100 court reports completed 80 result in a recommendation of approval; of the remaining 20, recommendations of denial are made on 16 and the other four are dismissed.

In the 1957-58 Fiscal Year, a twelfth public agency, the Santa Barbara County Welfare Department, was delegated responsibility for the study and report to the court on independent adoptions.

The independent program in California provides protective services for the children who are placed directly by their parents with the people petitioning to adopt. Any investigation made prior to the placement is limited to inquiries of the parties to the adoption.

The law requires the State Department of Social Welfare or delegated county agency to make a study with a report and recommendation to the court on each independent adoption petition filed with the court. In the case of an unsuitable adoptive home there is legislative provision for developing other plans for the care of the child upon order of the court.

### Stepparent Adoptions

For the first time in eight years, there was a decrease in the number of petitions filed by stepparents to adopt the child of his or her spouse. There was a similar drop in 1949-50. These two periods of decreased filings supports the suggestion that adoptions are directly affected by the economic and employment situation. The proportion of stepparent adoption petitions to total adoptions remains relatively the same. Stepparent adoption petitions are studied by the local



probation officer; these petitions represent slightly more than one-third of all adoption petitions.

### Maternity Care Program

The 1957 Session of the State Legislature passed a measure which provided the base for financing a program of maternity care for unmarried mothers. This has been a primary unmet need for many mothers considering adoption. The program will be put into effect in the next fiscal year. However, in September, 1957, the money necessary to operate such a program began to accumulate in a special deposit fund in the State Treasury.

Each month public adoption agencies deposit with the State for the maternity care program any fee collected from adoptive parents that is in excess of \$300. The total fee of \$400 required by law is payable upon completion of the adoption. Of this amount, the first \$300 is used to defray administrative costs. The county adoption agency may defer, waive or reduce the fee if the payment would create a hardship detrimental to the welfare of the child. A review made of plans agreed upon at the time of placement show that about 80 percent of adoptive parents expect to pay the full fee of \$400.

It is expected that the maternity care program will supplement existing services which will be continued. The maternity care plan will be under the administration of county adoption agencies. The plan provides for private medical and hospital care covering prenatal, confinement and postnatal service for expectant unmarried mothers desiring but unable to pay for private care. The law specifies that the care be provided for the mother who requests a public adoption agency to study her child with a view to accepting a relinquishment for adoption. This program will provide a greatly needed service to mothers considering adoption but without the means of meeting both medical and living expenses.

### Staff Development

Following special studies and reviews of particular aspects of the independent and relinquishment programs, a workshop and institute were held during the past year for the supervisory staffs of adoption agencies and area offices of the department. The workshop was held for supervisors with responsibility for the independent adoption program. Supervising staffs of 9 of the 12 agencies to which the program is delegated and of the three area offices attended a two-day meeting in December.

An institute was held in February, 1958, for the staffs of private and public adoption agencies. It was attended by 52 supervisors from 24 of the licensed agencies. The institute leader was Miss Elizabeth Meek of the Illinois Children's Home and Aid Society. The subject of the two-day meeting was to consider the purposes of agency services to families following the placement of the child until the completion of the adoption.

### Licensed Adoption Agencies

There are 12 private agencies placing children for adoption of which four limit their services to adop-

tions and eight provide adoption service as part of their child placing or institutional programs. The specialized agencies are:

### PRIVATE ADOPTION AGENCIES

Children's Home Society of California, operating since 1891 and providing service on a statewide basis with headquarters in Los Angeles and offices in Los Angeles, Oakland, San Diego, Bakersfield, Chico, Riverside, San Jose, San Francisco, Santa Ana, Santa Barbara and Oxnard.

The Adoption Institute, Los Angeles, licensed February 15, 1948.

Holy Family Adoption Service, Los Angeles, licensed July 19, 1949.

Infant of Prague Adoption Service, Fresno, licensed October 16, 1953.

The child welfare agencies licensed for adoption services are:

Catholic Welfare Bureau of the Archdiocese of Los Angeles, licensed for adoption services June 1, 1949.

Catholic Welfare Bureau of Long Beach, licensed for adoption services November 22, 1949.

Catholic Welfare Bureau of Sacramento, licensed for adoption services December 9, 1950.

Catholic Casework Bureau, San Diego, licensed for adoption services August 20, 1956.

Catholic Social Service of the Archdiocese of San Francisco, licensed for adoption services July 1, 1952.

Edgewood, San Francisco, licensed for adoption services June 1, 1954.

Homewood Terrace, San Francisco, licensed for adoption services July 1, 1949.

Vista Del Mar Adoption Service, Los Angeles, licensed for adoption services December 1, 1949.

### PUBLIC ADOPTION AGENCIES

\* Alameda County Welfare Commission, licensed November 1, 1949.

\* Contra Costa County Social Service Department, licensed June 15, 1950.

\* Fresno Department of Public Welfare, licensed May 16, 1949.

\* Los Angeles County Bureau of Adoptions, licensed January 24, 1949.

Sacramento County Department of Social Welfare, licensed November 7, 1952.

San Bernardino County Welfare Department, licensed July 5, 1951.

\* San Diego Department of Public Welfare, licensed February 11, 1948.

San Francisco Department of Public Welfare, licensed June 1, 1950.

San Joaquin County Welfare Department, licensed November 8, 1954.

\* San Luis Obispo County Welfare Department, licensed February 15, 1952.

\* San Mateo Department of Public Health and Welfare, licensed June 27, 1950.

\* Santa Barbara County Welfare Department, licensed February 18, 1955.



\* Shasta County Welfare Department, licensed March 1, 1950.

Solano County Welfare Department, licensed December 1, 1954.

\* Stanislaus County Welfare Department, licensed December 1, 1949.

\* Tulare County Welfare Department, licensed July 29, 1949.

\* Tuolumne County Welfare Department, licensed April 15, 1948.

## LICENSING

### QUESTION BY SERVICE STATION MANAGER

*Welfare work seems to be very similar to service station work. I take care of almost all the problems connected with automobiles, or at least, if I can't take care of it I can tell where to get the service. Are there any problems connected with licensing functions?*

Yes, there are. In a State as large as California there are many problems around the protection of the welfare, safety, and health of about 150,000 children and aged persons who receive care out of their own homes. Here is what the department did during the past fiscal year to solve the problems and to plan for the future.

### Advisory Committee

A major help in that direction was the initiation of an Advisory Committee for Institutions for the Aged. This committee met four times and made recommendations on the physical plant requirements for the institutions and also on admission and continuing care of aged with health problems. A subcommittee will study liability insurance problems and refunds.

The committee also endorsed the development of educational courses for the staffs and administrators of homes for aged. Preliminary discussions were begun with the UCLA Extension on the implementation of such a plan for Los Angeles area institutions.

### Workshop

In order to improve departmental services to public and private agencies providing out-of-home care to aged persons, public assistance, and other services, a workshop for departmental staff was held in San Francisco in October, 1957.

Four gerontologists with national reputation in geriatrics and gerontology provided leadership:

Dr. Karl M. Bowman, Professor of Psychiatry, University of California, School of Medicine, spoke on "The Problems of the Mind in Later Years."

Dr. W. A. Oliver, Director of Clinical Services, Napa State Hospital, discussed "Problems of Mental and Physical Health in the Aging" and described the "Napa Geriatrics Project" for the study of 100 patients.

\* The independent adoption program has also been delegated to this agency. Trend charts on adoptions are on page 21.

Dr. Llewelyn Jones, Chief of the Geriatric Section, Napa State Hospital, spoke on "Prejudice and Discrimination Against the Aged." He described common stereotype clichés, about the aged and basic emotional needs of older persons.

Dr. James E. Birren, Chief, Section on Aging, National Institute of Mental Health, explained "Dynamic of Change—Methods and Technique of Effecting Attitudinal Changes" and told of some findings in this area from research projects.

### Out-of-Home Care Study

A study of 500 recipients of old age assistance living in 12 of the larger counties was initiated. The study included characteristics of recipients in living arrangements other than in their own homes, funds available to meet the cost of care, the extent to which financial needs are met and the nature of their quality of services needed and those provided. A major objective of this study is to identify the factors leading to inadequate standards of care and to establish priorities for department and county efforts which will promote a better standard of out-of-home care.

### County Workshops

Numerous workshops and institutes for boarding home operators were conducted in many counties throughout the State. These training sessions represented a joint venture of state and county staffs. Through these meetings, operators of family boarding homes for the aged have been enabled to increase their knowledge of the nutritional, physical and emotional needs of aged persons.

### Preschool Children Day Care

The quality of care and guidance preschool children receive in licensed facilities depends primarily on the personal, educational and experience qualifications of the adults who serve them. A major, long-term objective, therefore, is to increase the understanding, knowledge and skill of staff of day nurseries.

The educational qualifications vary greatly, ranging from those who have graduate degrees to those who have high school or less formal education. This range occurs within the different types of programs.

The majority, about two-thirds, of the 900 plus licensed day nurseries for 11 or more children are private business ventures which serve primarily children of working parents. The other one-third are nonprofit, divided about evenly between church or community chest sponsored nurseries and parent-cooperatives.

### Shortage of Trained Nursery Staff

There are not enough persons trained in nursery education or early childhood development to meet the needs of nurseries.

At the request of the Bureau of Guidance of State Department of Education, the department prepared a job description of staff in day nurseries for inclusion in the high school Counselor's Guide to Occupations Relating to Homemaking.



### Legal Aspects Seminar

While denial of application or revocation of license is relatively rare, greater protection of children and adults results from staff's increased knowledge of procedures to be followed when legal action must be taken.

All departmental licensing staff participated in a workshop which covered: legal base and philosophy of the department's licensing programs; ways to work more effectively with the legal profession and guidance in gathering evidence in preparation for legal action.

### Houseparent Training

The Executive Committee of the California Conference on Houseparent Training continued its efforts to explore the resources which might be used to develop a training program. In this process, it was learned that the Extension Division of the University of California would accept responsibility for the educational aspects of this program.

Funds granted by the Rosenberg Foundation were used to secure expert consultation in the development of plans for a demonstration project, and implementation of plans in the next fiscal year can now be anticipated. Such a training program by terms of the Rosenberg grant would be open to public, as well as private child caring agencies.

### Financial Problems

Several institutions have recognized that they could not continue existing programs or develop the quality of service needed unless additional funds could be obtained. When such funds were not available, one long-established institution serving more than 100 children terminated its service. Other institutions are now engaged in an analysis of the cost of care and the degree to which this cost is currently met by payments received from parents and community agencies. Several institutions have requested the help of the department in establishing a cost accounting system which will show more accurately, the cost of providing needed services.

### Surveys of Available Resources

A number of community groups have expressed concern about the lack of group care facilities equipped to serve emotionally disturbed children. This department has cooperated with the California Parole and Probation Association and the California Youth Authority in developing tentative plans to determine the number of facilities willing and able to serve children who are wards of the juvenile courts and the extent of unmet need for such care.

Another study is now in process which will show the number of children admitted, rejected and discharged from a group of institutions in Northern California during a three month period, the characteristics of these children and the reasons for the decisions made. A "Study of the Older Girl and the Law" is also being made by a committee established by the Governor's Committee on Children and Youth

to determine the treatment resources available for girls over 16 years of age.

A recent analysis showed that the 71 institutions for children licensed by the department have a licensed capacity of 4,606 children. Nine of these institutions have licenses with upper age limits of 12 years or less, 14 serve children under 14 years only and the remaining 48 institutions serve children up to 16 years of age. (These figures do not include two facilities licensed to provide emergency shelter only, two institutions not available for general use or five camps operated by children's institutions.)

### New Construction

Twelve institutions initiated new construction or extensive remodeling during the year. Two facilities will have completely new physical plants, six will have new or remodeled cottages or living units, one will have a new recreation building, three will have new infirmaries through new construction or remodeling of existing buildings, and three will have more adequate quarters for staff.

### Maternity Homes

A new physical plant is being constructed for one maternity home, consisting of four cottages that will provide living quarters for a housemother and 12 to 14 girls. Institutions for children have long recognized the value of a cottage plan of this type, but this represents the first use of this plan by a maternity home in California.

Another maternity home achieved greater privacy for pregnant girls through extensive remodeling of an existing building.

### Foster Family Homes

The downward trend in the number of licensed foster homes available for 24-hour care of children has been reversed during the past year. The number of licensed homes increased from 7,533 on June 30, 1957, to 7,840 on June 30, 1958. It is believed that this achievement can be accredited to the extensive effort made to recruit and retain the services of foster parents.

In an increasing number of counties, regular meetings with licensed foster parents and news bulletins have been used to help foster parents feel a part of the agency program, gain a better understanding of problems encountered in the care of foster children and obtain a wider knowledge of the resources available to meet the needs of these children.

### Staff Development

The department assisted accredited agencies in providing inservice training for licensing staff and in determining the workload which a licensing worker can carry effectively.

Four southern counties developed a co-operative plan for a series of four institutes for licensing staff to be held over a two-year period. The first workshop explored the nature and objectives of licensing and the next session will consider the application of standards. Licensing staff from Northern California



counties have also participated in two institutes planned with the help of the San Francisco area office of the department.

### Child Placing Agencies

Twenty private agencies continue to provide temporary foster family care for children, either as a primary function or as a part of a multifunction program. Eleven of these agencies are family service agencies and three are multifunction children's agencies. Two of the latter also provide residential group care. Six additional agencies serve children who require out-of-home care. In most instances, the provision of institutional care is the major function of these agencies, but foster family homes are used when group living is considered unnecessary and when a child has obtained maximum benefit from his group experience but cannot return to his own home.

The foster family homes used by these agencies usually receive a certificate of approval issued by the agency. During the past year, the number of such homes continued to decrease (from 883 to 838 on June 30, 1958).

## SERVICES

### QUESTION BY AN ACCOUNTANT

*So far in your report to Governor Knight I have gained the impression that everything is very neatly pigeonholed into separate and distinct functions. I am sure that is not quite true. How do you keep all these activities separate yet operate as a department?*

Almost everything is as you implied, neatly pigeonholed into separate activities, but they are tied together in many ways. First, there are the field operations which are carried out in three area offices; one each in Los Angeles, San Francisco and Sacramento. The field staff in these offices is basically a line organization responsible for executing department policies. These offices bridge the gap and provide close co-operation with county welfare departments and other agencies.

**Another function which provides "togetherness" is the field review activity.**

Field review is one of the department's activities by which local administration of the public assistance programs is evaluated. It does this through an annual case audit, and through special audits and studies of specific aspects of the programs. Case reading and administrative interviewing are the main methods used.

In 1957-58 field review teams conducted audits in 24 counties for the purpose of determining whether recipients of the public assistance programs were eligible for the aid received and whether the payments made to them were in the correct amounts. During the latter part of the year, the scope of the audit was broadened to cover the new Aid to the Disabled and Medical Care programs. About 4,900 cases were reviewed.

In addition to the statewide audit, special field studies were made in selected counties on the need

for and extent of guardianship services and housekeeper services. Special reviews were completed on the implementation of the new Aid to the Disabled program and on the use and effect of the additional \$16 special need allowance in Old Age Security. A statewide study on the characteristics and needs of Old Age Security recipients in out-of-home care (living in boarding and nursing homes, institutions and hospitals) was planned and launched.

And in addition to the planning and co-ordinating activity on the above audits and studies, a plan for broad scope administrative reviews of county operations was developed; continued consultation on activities growing out of the administrative cost study; co-ordinated the project to test the prior authorization requirement in Medical Care; participated in the development of training plans on the conduct of studies and on casework consultation.

Plans for the future are concentrated in two major areas: **A re-examination of the usefulness of the present audit activity and its relationship to the broad scale administrative reviews which will begin next year; ways of evaluating the extent and quality of services being given to public assistance recipients.**

### QUESTION BY A LAWYER

*Where does legal advice and consultation fit into the department? Or do you obtain that service on a contract or from another department?*

Legal advice and consultation is supplied from within the department and there is also close co-ordination with the Attorney General's Office as to current problems, requests for opinions and court cases.

### An Example

In the course of making plans for the administration of the Medical Care Program, California Physicians' Service offered to perform fiscal, statistical and co-ordination services on a contract basis. This corporation was already performing similar services for other governmental agencies. The contract which was approved by the State and California Physicians' Service was later approved by 34 of the counties. The remaining 24 counties exercised their right to perform the work themselves thus resulting in a dual system of administration in the State.

Similar contracts with the pharmaceutical and dental services were signed with the California Pharmaceutical Association, and California Dental Association Services. With several exceptions, the same counties which became parties to the California Physicians' Service contract became parties also to the pharmaceutical and dental contracts.

### Attorney General's Opinions

A formal opinion requested from the Attorney General during the year involved the validity of a proposed contract between California Physicians' Service and the State acting on behalf of all the counties concerning fiscal, statistical and co-ordination services



under the Medical Care program mentioned above. The Attorney General advised that the State does not have the statutory authority to bind the individual counties to such a contract without their consent. Accordingly, since not all of the counties were willing to approve such a contract, the dual system mentioned above was developed.

Six requests for opinions affecting various aspects of the department's work were requested by county officials or state officials in other departments during the year. Among the requests was one by Nevada County concerning the validity of a Social Welfare Board regulation under the Aid to Needy Children program which authorized the payment of aid to a mother who has filed action for divorce even though the period of desertion or separation has been for less than three months. The opinion removed doubts as to the validity of the regulation, and insured that the needs of the children can continue to be met in such cases without the imposition of a penalty waiting period.

### Public Assistance Appeals

The number of appeals to the Social Welfare Board from county actions increased during the last year. In addition to appeals from county actions under the Old Age Security, Aid to Needy Children and Aid to the Blind programs, there were appeals filed under the new Aid to Needy Disabled and the Medical Care programs. The increase in the number of appeals filed over the preceding fiscal year amounted to approximately 14.7 percent, about 3.6 percent being appeals from the Aid to Needy Disabled program. The number of appeals filed under the new Medical Care program was insignificant.

The appeals workload during the last year is over double what it was seven years ago. The number of appeals filed was the largest in history but the amount of increase over the prior year was small and is not considered significant. The workload during the last seven years is shown by the following data:

Fiscal year	Appeals filed	Appeals disposed of	
		By Board Decision	By withdrawal, dismissal, etc.
1951-52 -----	702	327	359
1952-53 -----	762	439	345
1953-54 -----	942	560	447
1954-55 -----	1,245	575	622
1955-56 -----	1,226	669	633
1956-57 -----	1,246	612	604
1957-58 -----	1,429	670	762

Appeals activity during the year is summarized in Table 41. The elapsed time from the date of filing of all appeals pending at the end of the fiscal year is shown in Table 42. (Tables are in a separate booklet which can be obtained upon request.)

All hearings of these appeals during the year were conducted by State Social Welfare Board referees who submitted proposed decisions to the board for consideration. The referees were under the direct supervision of the department's associate counsel who served as chief referee and conducted some of the more difficult hearings.

### Court Cases

The only appellate court case in which the department became involved during the year was Guardianship of Henwood. Although not a party to the action the department, through the attorney general, asked for and was granted permission to appear as a friend of the court in view of its interest and concern about adoption matters. The case involved two children whose mother was dead and whose father had relinquished them to the Alameda County Welfare Commission for purposes of adoption. Thereafter the grandmother of the children petitioned for guardianship. The trial court denied the petition on the ground that guardianship of children relinquished for adoption is not legally possible. The District Court of Appeal reversed the trial court on the ground that the Legislature may not constitutionally interfere with the rights of courts to determine the custody of children and that the adoption statutes relating to relinquishment are unconstitutional. In the Supreme Court it was the department's position that guardianship of relinquished children is possible but only upon a showing that the agency to which they have been relinquished is unfit to have custody, or that adoption is improbable. The Supreme Court decision (49 Adv. Cal. 648) follows the views of the department. The effect of the court's decision was to remove doubts as to the constitutionality of the statutes relating to relinquishment adoptions while at the same time affording court protection to children in the event of failure of the agency properly to perform its functions.

### Licensing Appeals

Several hearings involving license revocation under the program of Boarding Homes and Institutions for Aged and Children were conducted for the Social Welfare Board by hearing officers of the Department of Professional and Vocational Standards under the Administrative Procedure Act. One Social Welfare Board decision suspended the license of an institution until compliance with the fire alarm law could be obtained. The institution promptly entered into a contract for the necessary fire alarm installation. Upon a showing that the work was progressing in good faith the board stayed execution for several months until the installation was completed, and then dismissed the proceedings as no longer necessary. In this way compliance with a safety requirement was obtained without the necessity of closing the institution and moving the residents to other quarters.

### Indigent-residence Appeals

Counties involved in disputes with other counties as to responsibility for the cost of medical care to indigents relied heavily upon the statutes permitting reference of such disputes to the State Department of Social Welfare for decision. One county reported settlement of a large number of such disputes of long standing following reference of the cases to the department. In a number of other matters the forwarding of precedent decisions to the counties involved made reference of disputes to the department unnecessary.



## QUESTION BY NEWSPAPER REPORTER

*In the movies you often see what is purported to be "behind the scenes" activity. Can you take us behind the scenes in some of the programs?*

That is a large order and it would fill a book with detail after detail. However, it might be interesting to reveal the "behind the scenes" activities concerned with the Medical Care and the Aid to the Disabled Programs, due particularly to the short time between passage of legislation and the operating date.

While generally unobserved from outside the department, the details of planning and the mechanics of setting up operations may directly influence success or failure in starting a new program. Attention to all of the details of procedure and process made it possible for vendors to supply medical services to recipients when the program became effective October 1st.

This was a task of considerable proportions, particularly since there was very little to go on in terms of past experience or methods that could be adapted from other programs. Essentially, it was a process of working out methods and procedures from the ground up.

Involved in addition to the State Department and the county welfare agencies, were thousands of vendors of medical service who needed to know the rules and have the forms and procedures required to function under the program. Five hundred thousand welfare recipients were potentially eligible for service on the first day the program became effective, and they needed to know how to secure services provided.

This process of "tooling up" required planning for staffing, space, equipment, and operating procedures in the county welfare departments. It meant that the staffs of those agencies had to be trained to carry out the program.

This involved, too, a unique administrative relationship in that approximately half of the counties contracted with a private agency, the California Physicians' Service, to perform audit and practitioner relations functions for them. This meant working with the private contractor to insure not only his operational readiness, but to develop the procedures and processes between him and the counties and establish the basis upon which charges for services would be made.

Forms had to be designed, printed, and distributed to vendors and county welfare departments. Specially designed forms were needed for physicians, for dentists, for prescriptions, and for pharmacists' billings. These had to be printed in great volume so that the thousands of these practitioners would have sufficient supplies on hand to be able to participate in the program. Identification cards were required for each of the half-million recipients, and these had to be issued in their names prior to the effective date of the program.

Because this was a new program, involving new methods, the department staff prepared procedural, administrative, and staffing guides to assist local welfare agencies to prepare for the program. A special

training program was set up through which local agency staff were quickly trained in the basic elements of the Medical Care Program.

Class specifications for new positions were established and recruitment and examinations arranged to supply needed staff to local welfare departments. Fiscal and statistical reporting methods and forms were devised to provide the State with information needed to maintain its fiscal controls and evaluate operations of the program.

All of this administrative "tooling up" was a monumental task, made more difficult by the fact that it had to take place while policy determinations and negotiations with vendor groups were in process. This necessitated frequent changes in forms and method as policy decisions took place. But monumental as it was, it was only the first step in getting the program in operation.

As in the case of all new programs, even the most intensive study and preparation does not anticipate all of the problems that arise in operations. This requires a process of evaluation and revision as needs in actual operation dictate. Anticipating this need, plans were made for a quick review of operations in all counties of the State and this was carried out within three months after the beginning date of the program.

This, together with regular contact with practitioner groups and analysis of early data, led to a process of refinement of program procedures, revision of forms, and simplification of requirements so as to improve efficiency of operations and provide better services. This process continued for many months after the program became operative and it will continue as experience shows the way to improve methods so as to make the program better serve the people in as economical a manner as possible.

## QUESTION BY WHOLESALER

*Knowing how prices fluctuate in my business I would like to know how you handle the dollar for welfare recipients. That is, if you can give us some more "behind the scenes."*

What the dollar buys is more critical for welfare recipients than most people because of the limited number of dollars available to them. To assist them to maintain a minimum, but decent standard of living, it is necessary to re-examine and adjust the basic standards upon which individual budgets are figured.

Because food prices vary considerably in different areas of the State the department has used groupings of counties with relatively similar prices in establishing individual food budgets for families. A statewide pricing survey was conducted in November to determine the current situation. Tabulation and analysis of these data resulted in revision of pricing areas to narrow differentials between counties and provide for more equitable budgeting of food for families in the Aid to Needy Children program.

At the request of the State Social Welfare Board, the department undertook studies to determine how adequate current standards of assistance are for all



classes of welfare recipients. This study will be completed the end of the 1958 calendar year.

Initial action to determine adequacy of current standards centered on housing and utilities. This took the form of a study conducted through county welfare departments to determine actual costs of housing and utilities to recipients. Data obtained by personal visit to a sample group of recipients will show actual costs as well as type and characteristics of housing and utilities purchased. When tabulated, these data will be reviewed by a citizens' advisory committee which will make recommendations to the Social Welfare Board.

An advisory committee of experts in the fields of housing, home economics, nutrition, living costs, and economics was appointed by the Social Welfare Board to review standards for food, clothing, housing, and other necessities of daily life. This committee, convened in March, was engaged in studying existing and proposed standards which provide the base for determining individual grants at the close of the fiscal year.

#### QUESTION BY A BANKER

*You have been talking about the dollars and services for recipients, now please talk about the dollars for supplying the dollars and services for recipients.*

The extent to which people secure help and services promptly and effectively depends to a large degree on the efficiency and effectiveness of administration within the county welfare departments. The community at large wants full value for the administrative dollar. State and county welfare departments work co-operatively in securing continuing improvement in administrative effectiveness.

Important to administrative effectiveness is the collection and analysis of facts on program operations. To assist with method of obtaining such facts on a systematic basis and to conduct special studies to obtain information needed for policy formulation and administrative direction, the department expanded its technical research and statistics services. Analysts were assigned to work directly with county welfare departments in assisting them to improve research and statistics programs.

While frequently not very dramatic in themselves, the efficiency and effectiveness of internal procedures, space layout, organizational structure, lines of communication, equipment, and other management devices can have a dramatic effect on how well the community is served. Special attention continues to be given to improve these management devices.

Department administrative analysts, assigned to its field offices, provided a wide variety of management services to assist local administrators. These included studies of organizational structure; evaluation of staffing needs; consultation on space planning and utilization; help in determining equipment needs; and studies to simplify and improve procedures and controls.

In keeping with changing problems and with increased emphasis on administrative method, new classes of administrative service officer personnel were established in the State Merit System for the counties functioning under that program.

Staff training programs were expanded by county welfare departments with assistance of this department. Expert consultation was provided many counties to help them plan training programs. Training needs and activities in all counties were assessed as a basis for specific help to individual agencies and statewide programs for use of all agencies. The department worked with joint planning committees comprising representatives of groups of smaller counties to work out training programs in which all agencies could participate. Institutes covering management subjects were jointly developed and conducted by state and county agencies.

One of the most significant training activities was that established to enable county welfare department staffs to function effectively in placing the new Medical Care and Aid to Totally Disabled programs in operation. Training materials developed by this department were placed in the hands of county agencies well in advance of the effective date of the new programs. Training programs were arranged and conducted for county staffs throughout the State.

The joint concern of county and state welfare administrators with developing the most effective and efficient administration possible was reflected in the Administrative Cost Study program. This is a long-range joint study by county and state representatives aimed at identifying cost factors and improving methods of administration so as to provide maximum service at lowest cost.

Of particular significance was the development of guides for use of local administrators in analyzing their own operations. The marked variations between counties in population, geography, economic conditions and other factors makes it impractical to develop specific methods of administration that would have equal validity in all counties. In fact, this would probably not be desirable, even if practical, since flexibility and even experimentation provides incentives and leads to improvement in management methods.

The department, in co-operation with a selected group of study counties, conducted a time study in April to secure current information on administrative costs. Another study, specifically directed toward costs of administering the Medical Care program, was undertaken in order to evaluate various methods of procedure and processing under this program.

Steps toward simplifying procedures and requirements were taken in relation to financial and statistical reporting by county welfare departments. A special state-county committee was convened in the spring to review procedures, forms and reporting requirements established under the Medical Care program. Resulting from this work was considerable simplification in procedures and improved design of forms.





Co-operation between the State and counties is a must! It insures a good administration and provides a strong foundation for services to recipients for the benefit of all taxpayers. Here the Merit System Advisory Committee is shown in action. Left to right: Russell Groy, Solano County Welfare Director; Charles A. Stuart, San Joaquin County Welfare Director; William Hart, Orange County Personnel Officer; James C. Cloman, Supervisor, Plumas County; John T. Rogers, Vice Chairman, Supervisor, Yolo County; L. Roy Block, Chairman; A. R. Albouze, Personnel Officer, State Department of Social Welfare (SDSW); Hilda Moore, secretary, SDSW; Ralph Wilson, San Luis Obispo County Welfare Director; Melvin J. Boreilles, Supervisor, Humboldt County; Granville Peoples, Stanislaus County Welfare Director; and Richard Stevenson, Supervisor, Colusa County. Not shown in the picture are the following members: Earl E. Covannah, Supervisor, Imperial County; Poul J. Anderson, Supervisor, Riverside County; Charles R. Ingram, Director of the Santa Barbara County Welfare Department; and Mrs. Lucille Leonord, Director of the Modoc County Welfare Department.

#### QUESTION BY EMPLOYMENT AGENCY WORKER

*Just about everybody has asked a question. Maybe I will have the last question. What about employers—how are they hired and protected?*

This is answered by a little known function of this department, its administration of a merit system personnel program for county welfare departments.

Thirteen county welfare departments, employing 6,800 persons, are governed by local countywide civil service programs. These personnel programs meet standards established by the State and are regularly reviewed for conformity to these standards.

The remaining 45 county welfare departments, employing some 1,800 persons are governed by the county merit system program administered by this department. In this respect, the department functions as a civil service agency. The State Social Welfare Board serves as the Merit System Council. It establishes regulations governing pay, classification, tenure, and other factors relating to merit system employment.

An important step toward improvement in this personnel program was the establishment of higher minimum salaries. Particularly for social work classes, this placed the merit system counties in a better competitive position to attract and retain competent employees. Counties are given considerable leeway to set salaries within ranges established by the state board. This resulted in a wide spread between counties in entrance rates for employees. Establishment of the higher minimum salaries, based on securing a better relationship with prevailing wage rates statewide, reduced this spread considerably and eased recruitment problems for many of the county welfare departments.

In keeping with the needs arising from new programs and changes in administrative method, several

new classes of positions were established. These included administrative officer, employment officer, and medical care assistant classes.

To enable counties to maintain personnel strength and to recruit additional employees needed because of new programs, the statewide examining program was expanded. During the year, 597 examinations were administered, an increase of 70 percent over the number given during the previous year. The 4,251 applications filed for examinations represented a 15.3 percent increase over 1956-57. Separation rates remained relatively constant, being at 337 per 1,000 employees. This loss of employees was particularly serious in clerical classes in many counties in less populated sections, partially accounted for by relatively low salary rates in relation to other areas of the State.

### Awards

#### QUESTION BY COUNTY FAIR MANAGER

*The gentleman from the employment agency said that he had the last question, but I think I have one more question. What about awards? We see many of them in the fair business. What about the welfare business?*

That is an easy question to answer. In welfare there are very few awards, as such. Most of the satisfaction and rewards come in the form of professional pride for a job well done. Besides, welfare as a whole is something that many people just do not talk about—much less provide awards for accomplishments.

But that does not mean that there are absolutely no awards. There are a few.

There is one award of which all professional and lay people in the social welfare field are very proud of and many secretly hope to receive someday.

#### Koshland Awards

The story of the recent Koshland awards was printed in a late issue of the *Welfare News*, a department professional publication.

"The highlight of the recent California Association for Health and Welfare Conference in San Diego was the Koshland Awards which went to Miss Betty Presley of Marin County and Mrs. Frances Feldman of Los Angeles.

"Mrs. Elizabeth B. MacLatchie was the chairman of the Awards Committee and she made the presentations at the annual conference banquet. Others on the committee were: Homer E. Detrich, Katherine M. Grant, Catherine O'Connor, Elizabeth Payne, Mae Sargent, and Lulu Scott.

"The citations follow:

"To Miss Betty Presley, R. S. W., Director of Marin County Welfare Department, is given the 1958 Koshland Award for outstanding service as an executive in social work.

"Miss Presley has contributed as director of the Marin County Welfare Department since 1951 a firm conviction that an informed community would support an organization and staff geared to give casework services along with financial assistance to all Aid to



Needy Children and General Relief families with children, the vision to formulate objectives, the courage to put objectives into effect through decision and action, leadership which inspired casework staff to develop and use professional skills in serving Aid to Needy Children and General Relief families.

"What did these contributions accomplish?"

"Miss Presley changed a county welfare department from one whose primary emphasis was on eligibility determination to an agency whose primary emphasis is on casework services.

"She gained effective community interest for the salary investment inherent in such an approach.

"She has demonstrated that deeply troubled families receiving Aid to Needy Children and General Relief can be helped to achieve more constructive ways of life and financial self-sufficiency thus reducing assistance costs.

"While many administrators share Miss Presley's belief in the need of casework in the public assistance programs, few have been able to build it into their organizations as completely and with the continuity of support which has been achieved in Marin County.

"To **Mrs. Frances Feldman, Assistant Professor of Social Casework at the University of Southern California School of Social Work**, is given the 1958 Koshland Award for outstanding service as a practitioner in social work.

"Mrs. Feldman's contribution is in the production of an outstanding piece of professional literature. She is the author of 'The Family in a Money World,' a book which makes advances on two fronts. It adds to the body of social work knowledge new concepts of the management of money and the role of money in family living. Equally important, it is a contribution from the field of social work to all those who counsel families about money—teachers, ministers, personnel officers, many businessmen, home economists, and the like. It is the first publication to integrate these knowledges from a number of disciplines for the use of many. Its usefulness is attested to by its serving as the subject matter in institutes and conferences; its uniqueness by the fact that those conferences are persons from many fields of endeavor."

### **Marshall Field Award**

Another important award was the Marshall Field Award. Again a department publication is quoted.

"Governor Goodwin J. Knight was notified recently of the Marshall Field Awards by Mrs. Ruth Pruyn Field, widow of Marshall Field, New York.

"Governor Knight said that one of the seven awards made nationally will go to the California State Department of Social Welfare, together with the Adoption Survey Committee, the Citizen's Committee on Adoptions, the Los Angeles County Bureau of Adoptions, the Rosenberg Foundation, and the Columbia Foundation.

"Specifically, the award is for the marked extension and increased services to children needing adoption. Children with special needs and those with minority backgrounds have been given emphasis and California is the only state with public funds espe-

cially appropriated for adoptive services to children under the Refugee Relief Act.

"The department adoption activities are under the jurisdiction of the Division of Child Welfare headed by Miss Lucile Kennedy, who added, 'In 10 years, licensed public and private adoption agencies have increased in number from 2 to 26.'

" 'This honor,' the announcement read, 'is based on the board's (Marshall Field Award Board) recognition that the services named constitute an essential pattern—private funds, citizen effort and sound public administrative bodies working co-operatively for good adoption prices.'

"Marshall Field established the awards in 1956, not long before his death, for the purpose of focusing public attention upon children's needs. Awards were presented for notable achievements in the areas of education, physical and mental development, social welfare and communications.

"Lay leadership played an important role in the winning of the social welfare award for California in the development of adoption services.

"The Adoption Survey Committee, in 1946 was headed by Charles M. Wollenberg, and for the Citizens Committee on Adoption, Judge Ben Koenig and Wesley G. LeFever, both of Los Angeles have served as chairman.

"The foreword of the Citizens Committee report sounded the keynote of its focus, 'The report bears witness to that vitality and to the amazing degree with which the vast number of citizens serving on the Statewide Committee, the local committees, and the subcommittees accepted responsibility for raising questions on the adoption program, for seeking answers, and for taking steps in their communities to develop answers in terms of service.'

"The studies by the lay committees were financed by the Rosenberg and the Columbia Foundations. Charles De Young Elkus is the president of the Rosenberg Foundation and Leon B. Russell, is the president of the Columbia Foundation, both of San Francisco. Walter Heath is the director of the Los Angeles County Bureau of Adoptions.

"The scroll legend read: They, by understanding study and co-operative effort, have contributed abundantly to the development and implementation of an adoption program which embraces all children who need this care, without discrimination as to race, creed, color, age, and physical handicap. They have demonstrated what can be achieved when private funds, citizens' efforts and public administrative bodies work co-operatively for sound social good."

### **National Federation of Advertising Agencies Award**

Another award in which the same source is again quoted was received recently.

"The State Department of Social Welfare recently won a national award for the Client Interpretation Folder and Brochures.

Mr. George K. Wyman received the award for the department in a ceremony in Sacramento recently. Mr. Fred Elkus of Gerth, Brown, Clark and Elkus,



the advertising agency that did the art work from rough layouts supplied by the department, made the presentation.

"The final designs which Gerth, Brown, Clark and Elkus worked on were the result of an extensive public relations survey throughout California and a pilot program in several counties.

"The program was created as a starting point of a method to assist social workers in their contacts with recipients and to be a factor in recognizing the worth of the welfare programs operated by the counties.

"This program was recently launched throughout California and it is expected that follow-up material will be issued later based on the receptiveness and reaction of the recipients and the needs of the social workers.

"The program is under the supervision of the department public information officer."

## DIRECTOR OF THE STATE DEPARTMENT OF SOCIAL WELFARE

The State Department of Social Welfare is a small department, in number of employees, most of the work is supervisory, advisory and guiding the administration of the programs in the 58 county welfare departments throughout California. The department functions as an agent of the Federal Government in the disbursement of funds according to state plans. It also carries out the laws enacted by the California State Legislature.

The director is appointed by the Governor with the advice and consent of the Senate in accordance with Section 105 of the Welfare and Institutions Code.

Welfare and Institutions Code, Section 101, refers to the State Social Welfare Board, which consists of seven members. "Each member of the board shall be appointed by the Governor with the advice and consent of the Senate for a term of four years, the term to rotate. . . . The members of the board shall be selected for their interest and leadership in social welfare activities without regard to political or religious affiliations or profession or occupation."

The staff of the department consists of about 580 people including professional social workers who specialize in the many phases of the programs, and professional or skilled workers in administration, accounting, training, personnel and other necessary services.

### George K. Wyman

The person directly responsible for expenditures of over \$400 million a year in state, county and federal funds for assistance payments, administration and services during the fiscal year of 1957-1958 was George K. Wyman who was appointed Director of the State Department of Social Welfare December 20, 1954.

Mr. Wyman is the junior past president of the California Conference of Social Work; chairman, Gov-

ernor's Committee on Refugee Relief; member, Executive Committee, National Council of State Public Assistance and Welfare Administrators.

Also, member, Board of Directors, American Public Welfare Association; member, Welfare Policy Committee of American Public Welfare Administration; member, State Advisory Board, California Congress of Parents and Teachers; member, Interdepartmental Co-ordinating Committee on Aging; member, Co-ordinating Council on State Programs for the Blind; member, Advisory Committee, Board of Social Work Examiners; member, Western Gerontological Society; member, National Association of Social Workers; California Registered Social Worker; member, American Society for Public Administration; member, Medical Care Advisory Committee, American Public Welfare Association; chairman, California Committee for Careers in Social Work; member, Public Social Services Panel, Council on Social Work Education; and other groups not directly connected with social welfare.

## STATE SOCIAL WELFARE BOARD

The duties of the Social Welfare Board are outlined in the Welfare and Institutions Code and Section 103 refers specifically to the powers and duties: "The Social Welfare Board hereby established shall advise the director in the performance of his duties and, by regulation, formulate general policies affecting the purposes, responsibilities, and jurisdiction. . . . The board shall have the power and it shall be its duty to adopt, repeal, and amend such rules and regulations which are consistent with law and reasonably necessary for the administration of welfare. . . . The board shall have no administrative or executive functions other than those set forth in this code."

### John T. Martin

John T. Martin, San Diego, has been a member of the board since January 15, 1944, and chairman since June 16, 1952. The board chairman is selected each year by the board in accordance with Section 102, Welfare and Institutions Code.

Mr. Martin is a retired businessman and a public-spirited citizen who has served his city, his county and his State for many years in many capacities and is extremely interested in the betterment of his fellow man.

He was President of the San Diego Rotary Club, 1938-1939; President of the San Diego Chamber of Commerce, 1941-1942; President of the San Diego War Chest, 1942-1946; President of the San Diego-Imperial County Council, 1941-1944; Campaign Chairman for the first USO Campaign, 1941; member, Board of Trustees, Boys Club of San Diego, 1941-1944; member, Committee of Management, Armed Services YMCA 1941-1955; member, Executive Committee and Management Committee, California War Chest, 1942-1946, and has had many other volunteer assignments.



**Mrs. Jackson W. Chance**

Mrs. Jackson W. Chance, Palo Alto, a member of the board since September 18, 1952, and vice chairman since February, 1955, is well known for her activities in civic affairs and came to the board particularly well versed in the duties and activities of the board. She was, for a number of years, the official observer for the League of Women Voters at the meetings of the board.

Mrs. Chance was a member of the Citizens Advisory Committee on Public Assistance in Los Angeles County; past president of the Pasadena League of Women Voters; past member of the State Board of the California League where she served for several years as chairman of the Social Welfare Department in the league and later as chairman of the International Relations Department; member, National Board of the Family Service Association of America; member, Family Service Society of Los Angeles; member, Council of Social Agencies and Community Chest; member, Board of the Women's Hospital of Pasadena; member, Family Service Society of Pasadena; the Westridge School for Girls; the Pasadena Area Chapter of the American Association for the United Nations, and other groups.

**Mrs. Lawrence W. Frankley**

Mrs. Lawrence W. Frankley, Los Angeles, a member of the board since May 23, 1957, is a past president of the Women's Division of the Los Angeles Chamber of Commerce and is presently a member of the board. She is also a member of the board of the Museum of

Science and Industry and is vice president of the Assistance League of Los Angeles. Her other offices are: director of the Los Angeles Chapter of the American Red Cross, U.S.O., and the College of Osteopathic Physicians and Surgeons. In addition, Mrs. Frankley is the vice president of the World Affairs Council, a member of the Advisory Board of the Junior League and a member of the Community Chest's Red Feather Breakfast Committee.

**Norman J. Hartzler**

Norman J. Hartzler, Los Angeles, a member of the board since March 22, 1954, is a well-known businessman and active in welfare events. He is a member of the Board of Trustees of the Catholic Welfare Bureau of Los Angeles; member of the Board of Governors, Welfare Federation, Los Angeles; formerly a member of the Little Hoover Commission, Los Angeles, 1951-1954; and other organizations. Mr. Hartzler was reappointed for a four-year period to end January 15, 1962.

**Louis N. Slater**

Louis N. Slater, Fresno, a member of the board since May 23, 1957, is the president of the State Center Bank and the Slater Furniture Company in Fresno. Also, he is a past president of the Fresno Commercial Club; advisory chairman of the Community Chest; past member of the board of the Tuberculosis and Health Association and is currently director of the Heart Association. He has been chairman of the Finance Committee of the American Red Cross



George K. Wyman, Director of the State Department of Social Welfare poses with the State Social Welfare Board; he is standing on the far right. The new board member, Mrs. George H. Bowman, is shown standing in the center. The others are, standing left to right: Dr. Jacobus tenBraek, Louis N. Slater, and Norman J. Hartzler between Mrs. Bowman and Mr. Wyman. In the front row, left to right: Mrs. Jackson W. Chance, vice chairman; John T. Martin, chairman; and Mrs. Lawrence W. Frankley.



for the past 30 years. He is a member of the Advisory Board of St. Agnes Hospital; president of the Sisters of Nazareth Home for the Aged; president of the Temple Beth Israel; past president of B'nai B'rith; and is a member of the board of Boys' Club and the Boy Scouts of Fresno.

#### Dr. Jacobus tenBroek

Dr. Jacobus tenBroek, Berkeley, a member of the board since May 4, 1950, is a well-known scholar and is interested in welfare activities, particularly those of the blind. He is a professor at the University of California and chairman of the Department of Speech.

Dr. tenBroek was the titular and actual administrative head of a statewide campaign which succeeded in amending the State Constitution at the election in November, 1949. The amendment placed in the Constitution Article XXVII which reorganized the welfare system of California.

He was one of the founders of the National Federation of the Blind in 1940 and has been re-elected as its president every two years since then. In addition, he is president of the American Brotherhood of the Blind; president of Opportunities for the Blind; member of the President's Committee on Employment of the Physically Handicapped; and other groups.

#### Mrs. George H. Bowman

Mrs. George H. Bowman was appointed to the board in place of Mrs. Tadini Bacigalupi who retired during the fiscal year. Mrs. Bowman's term will end January 15, 1962.

Mrs. Bowman, San Francisco, has been active in civic events for the past 20 years and is a member of the Board of Directors of the San Francisco Senior Center and the Homemakers Services; chairman of the committee of the Senior Recreation of the Group Work and Recreation Council; and a board member of the San Francisco Volunteer Bureau; and a member of the Governor's Advisory Committee on Children and Youth.

She is a past president of the San Francisco Second District United Community Fund group; a past president of the San Francisco Girl Scouts. She is active in the California Congress of Parents and Teachers.

#### Mrs. Tadini Bacigalupi

Mrs. Tadini Bacigalupi, San Francisco, retired from the board during the fiscal year, was a member of the board since March 20, 1947.

She has also been a public spirited citizen interested in welfare work. She was a member of the Board of Directors, Council of Social and Health Agencies, 1920; member, Board of Directors, Community Chest, 1922-1938; chairman, Chest Budget Study Committee on Relief, 1927; chairman, Chest Budget Study Committee on Hospitals and Health, 1929; chairman, Chest Budget Study Committee on Children 1933; Community Plan for Child Welfare, 1933-1937; chairman, Children's Council, 1938; treasurer, San Francisco Center, League of Women Voters, 1924; treasurer, American Association of University Women, 1923; chairman, Baby Hygiene Committee, 1923-

1926; founder, member and treasurer, Planned Parenthood Association, 1929-1954; founder and member, Mothers' Milk Bank, 1948; organized Children's Protective Society, 1931; secretary, American Red Cross, 1928; member, Red Cross Home Service Committee, 1946; canteen chairman, Red Cross, 1941-1949; member, Appeal Committee, San Francisco County Welfare Department, 1942-1947. Also she is the chairman of the Nursing Services of Red Cross; and a member of the Board of the California Conference of Social Work.

## STATE DEPARTMENT OF SOCIAL WELFARE

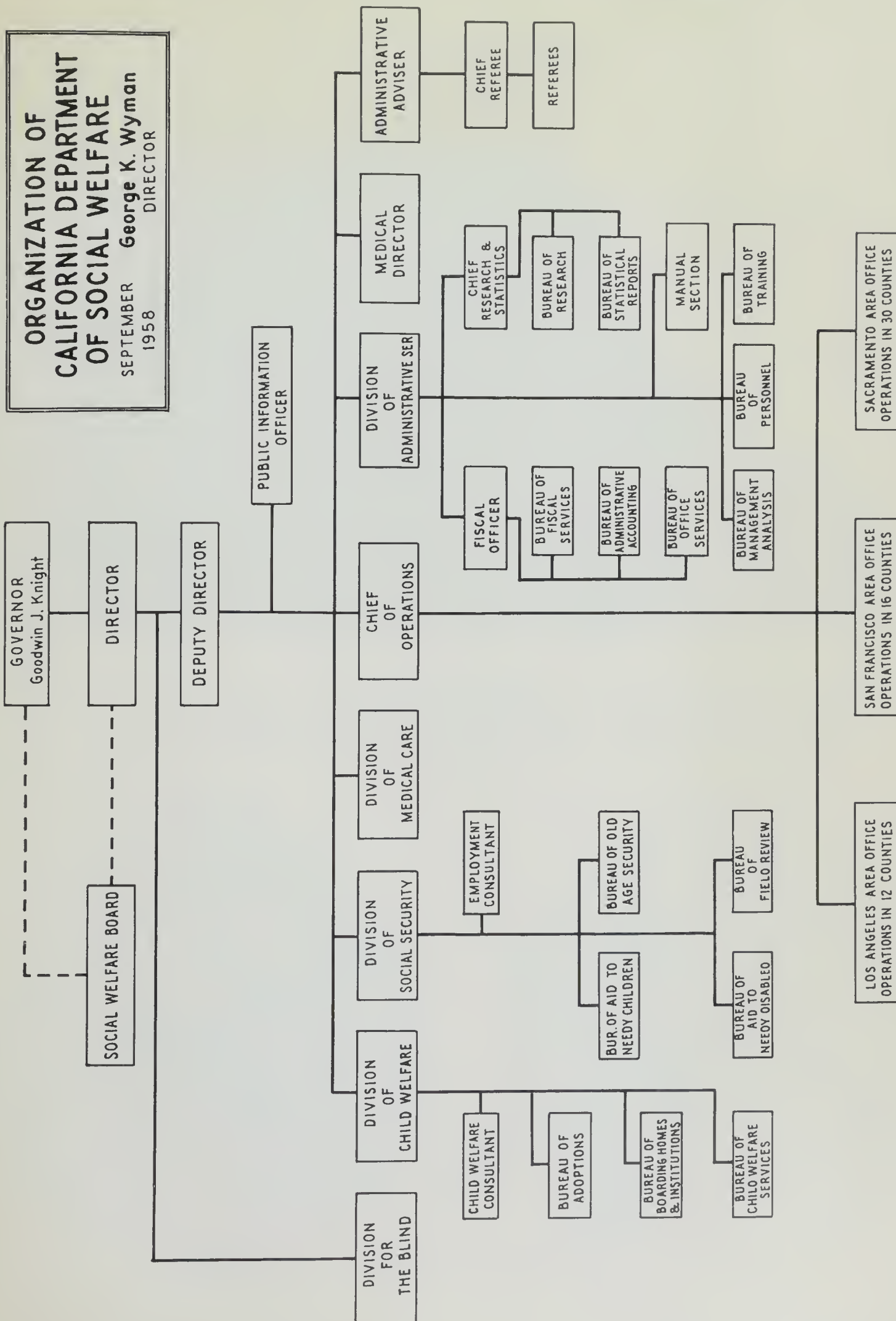
### STATE OF CALIFORNIA

GEORGE K. WYMAN

Director, State Department of Social Welfare

**C. A. Herbage** ----- **Deputy Director**  
 Bert F. Williams ----- Public Information Officer  
 Allen O. Cooper ----- Administrative Adviser  
 Thomas T. Jordan ----- Chief Referee  
 E. E. Silveira ----- Chief of Operations  
 Ralph Goff ----- Area Deputy, Los Angeles Area  
 Harry White ----- Area Deputy, Sacramento Area  
 Jane McKaskle ----- Area Deputy, San Francisco Area  
 Perry Sundquist ----- Chief, Division for the Blind  
 Lucile Kennedy ----- Chief, Division of Child Welfare  
 Katherine Kuplan ----- Chief, Bureau of Adoptions  
 Helen Clanson, Chief,  
 Bureau of Boarding Homes and Institutions  
 Elizabeth Rhoads  
 Chief, Bureau of Child Welfare Services  
 Grace E. Nichols ----- Child Welfare Consultant  
 Elizabeth MacLatchie  
 Chief, Division of Social Security  
 Arthur W. Potts  
 Chief, Bureau of Aid to Needy Children  
 Thomas Pyott  
 Chief, Bureau of Old Age Security  
 Leon Lefson  
 Chief, Bureau of Aid to Needy Disabled  
 Marion Chopson ----- Chief, Bureau of Field Review  
 Carel E. H. Mulder ----- Chief, Division of Medical Care  
 John D. Keye, M.D. ----- Medical Director  
 Sanford N. Kauffman, D.D.S. ----- Dental Consultant  
 N. R. Holcomb  
 Chief, Division of Administrative Services  
 John A. Harris ----- Chief, Bureau of Training  
 F. C. Locher  
 Chief, Bureau of Management Analysis  
 A. R. Albouze ----- Chief, Bureau of Personnel  
 Verne Gleason ----- Administrative Assistant  
 Henry Stefani ----- Fiscal Officer  
 A. C. Ricksecker  
 Chief, Bureau of Fiscal Services  
 V. Schaeffer  
 Chief, Bureau of Administrative Accounting  
 Grace Seroggin ----- Chief, Bureau of Office Services  
 Wilbur L. Parker ----- Chief, Research and Statistics  
 P. E. Keller ----- Chief, Bureau of Research  
 William F. Hirtz  
 Chief, Bureau of Statistical Reports





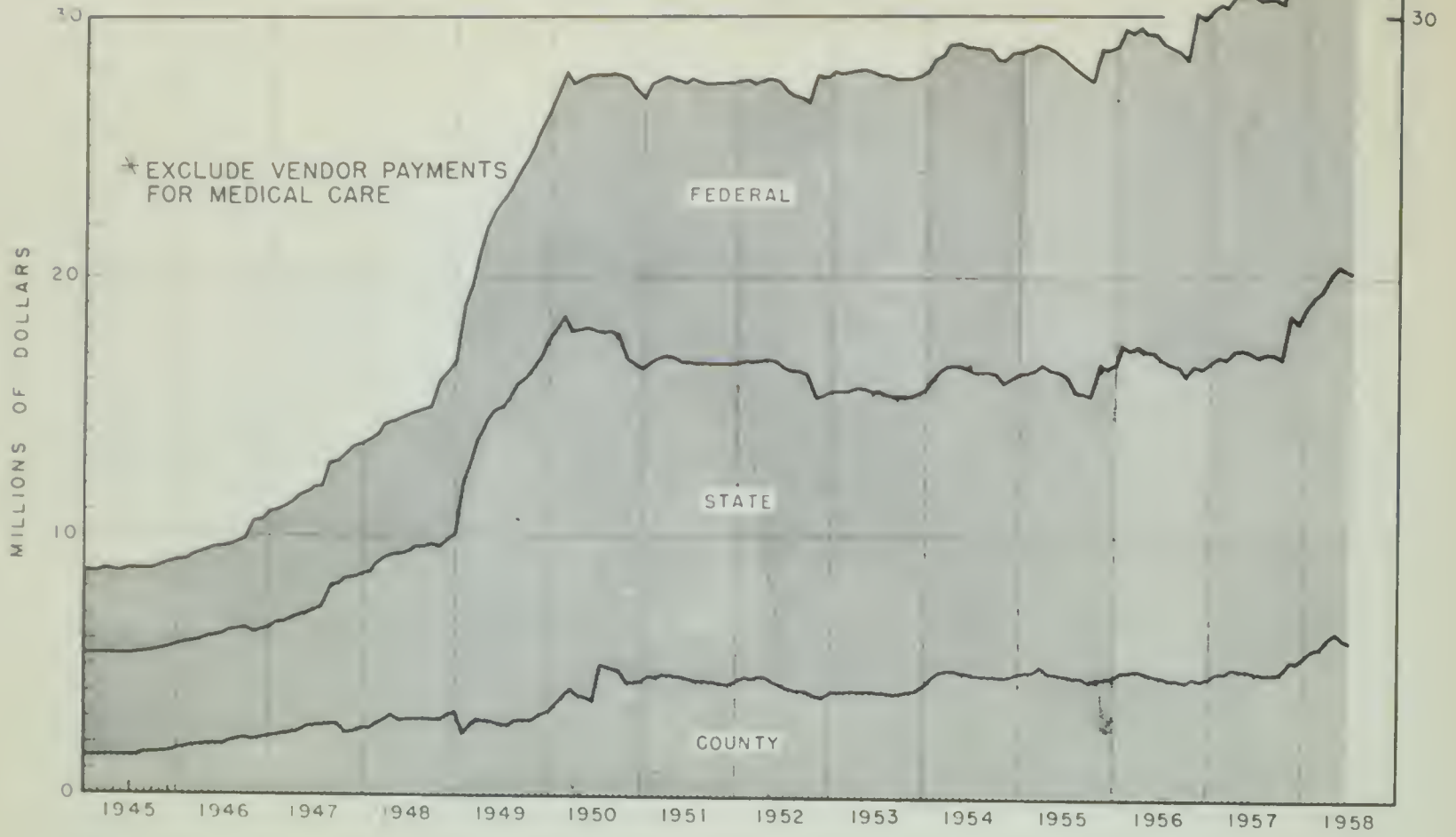


REPORT OF DEPARTMENT OF SOCIAL WELFARE

STATE OF CALIFORNIA

TOTAL PUBLIC ASSISTANCE EXPENDITURES\*

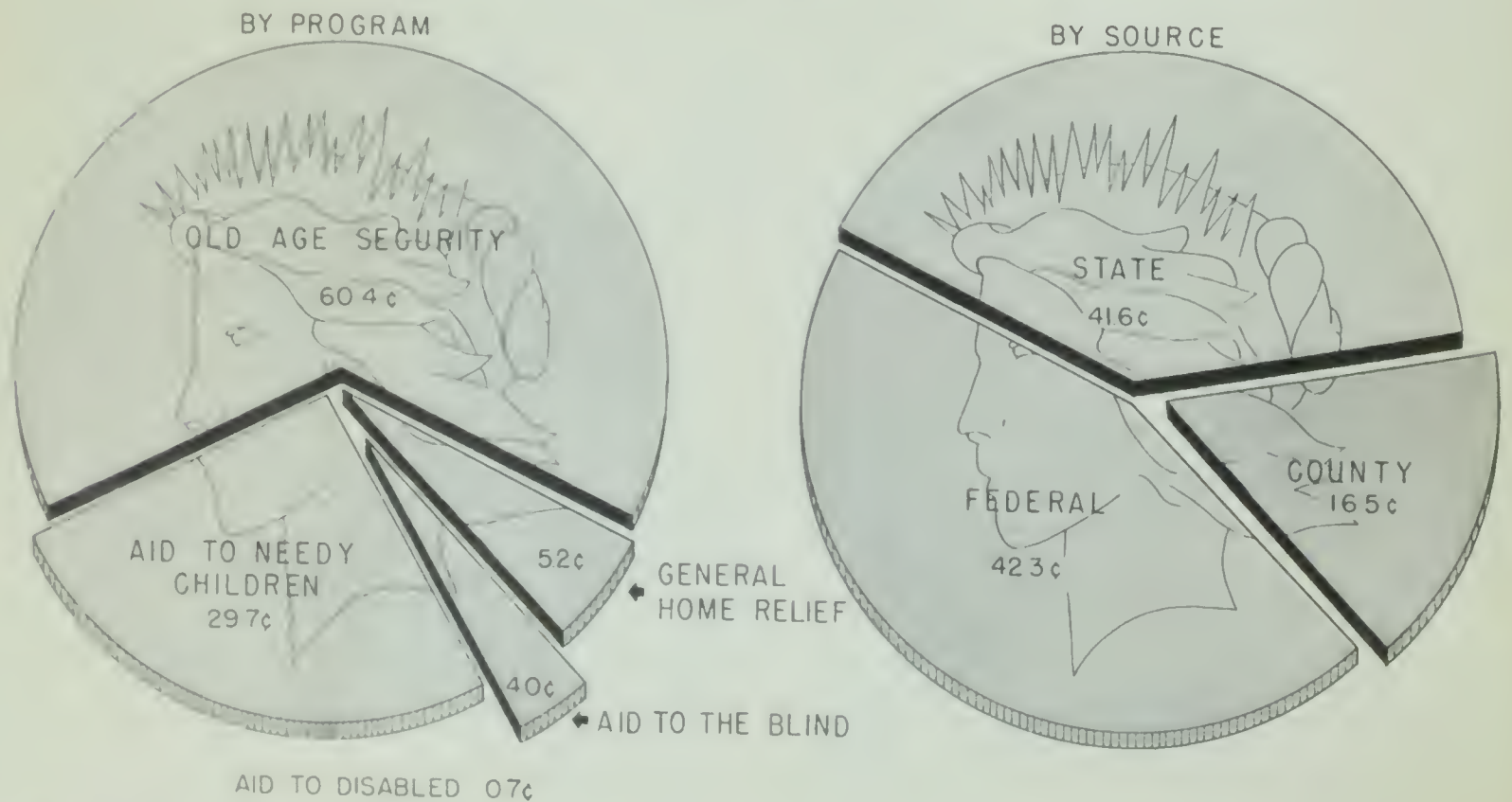
BY MONTH, JANUARY 1945 TO JUNE 1958



STATE OF CALIFORNIA

THE PUBLIC ASSISTANCE DOLLAR

JUNE 1958



\* EXCLUDES VENDOR PAYMENTS







